

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST

FIRE EXTINGUISHERS - MONTHLY INSPECTION

SITE AND BLDG #: VA001

MECHANIC
SIGNATURE: 

DATE: 5/2/24

LOCATION/RM #: _____ WO# 15481 ASSET # G038

START TIME: 2PM

FINISH TIME: 3PM

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
SPECIAL INSTRUCTIONS				
1	Each extinguisher shall have an inspection tag securely attached that indicates the month and year the inspection was performed and the initials of the person performing the inspection shall be recorded.	●		

Note: The technician shall perform any repairs identified during PM up to \$250 (direct labor and direct material cost) per PM occurrence. For any deficiencies found exceeding \$250 open a corrective maintenance (CM) ticket and include the Asset #, WO #, photos, and a detailed description of the deficiency.

To be performed by: General Maintenance Worker

Additional Notes:

All FE's at this location check out well with no issues.
-AS

