

**PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST**  
**ICE MAKER**

SITE AND BLDG #: PA062

MECHANIC  
SIGNATURE:

DATE: 2/7/2024

LOCATION/RM #: WO# 14905 ASSET # 6795,6851 START TIME: 9:00AM FINISH TIME: 10:15AM

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
<b>SPECIAL INSTRUCTIONS</b>				
1	De-energize, lock out, and tag electrical circuits.	●		
2	Only approved cleaning chemicals shall be used.	●		
<b>TO BE PERFORMED AT EACH INSPECTION SERVICE</b>				
1	Check with operating or area personnel for any deficiencies; verify cleaning program.	●		
2	Visually check for refrigerant, oil and water leaks.	●		
3	Inspect ice condition/size.	●		
4	Clean air filter	●		
5	As needed, drain and clean unit with proper ice machine cleaning solution. Drain and clean at a minimum of annually.	●		
6	Check date on water filter, Replace as needed. Water filters should be changed annually at a minimum.	●		Needs filter system for filter
7	Check and tighten any loose screw-type electrical connections.	●		
8	Check all controls; adjust if necessary.	●		
9	Examine water connection; open and close water valve; test ice dispensing valve and (door) metering adjustment.	●		
10	Check and clear ice machine draining system (drain vent, strainer, trap).	●		Drain needs fixed water draining on floor
11	Examine condition of bin doors-closure, hinges, gaskets, handles and ease of slide; lubricate as required. Check storage bin condition.	●		
12	Clean motor, compressor, and condenser coil.	●		

Note: The technician shall perform any repairs identified during PM up to \$250 (direct labor and direct materials). If the repair cost exceeds \$250, the technician shall open a corrective maintenance (CM) ticket and include the Asset #, WO #, photos, and description of the repair.

To be performed by: General Maintenance Worker

Additional Notes:

