

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
MISCELLANEOUS KITCHEN EQUIPMENT

ACTIVITY AND BLDG #: **NY127 BLDG1**MECHANIC
SIGNATURE: DATE: **1/17/23**LOCATION/RM #: **kitchen** WO# **20552** ASSET # **see below**START TIME: **9am**FINISH TIME: **10am**

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
SPECIAL INSTRUCTIONS				
1	Notify cafeteria operator and get permission prior to performing all maintenance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2	De-energize, lock out, and tag electrical circuits and fuel service.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Check with operator or manager for any deficiencies, verify cleaning program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2	Check all controls, mechanisms for proper operation; adjust as required.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3	If applicable, examine utility supply line, piping, valve packing, specialties, and insulation; look for any leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4	If applicable, check electric power line condition, switch, disconnect, etc.; or check condition of gas supply, valves, regulators, and inspect pilot, check for Gas leaks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5	Ensure unit is clean and in working order. Note any deficiencies.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

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:

ASSET#'S,
190917-,
646,648,649,
653,656,657,
661