

**PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST**  
**PLUMBING FIXTURES**

ACTIVITY AND BLDG #: NY023-118

MECHANIC  
SIGNATURE: *Deen Chow*DATE: *1/1/22*LOCATION: *Bathrooms (Men / Women)*START TIME: *1pm*FINISH TIME: *3:30pm*

Site Location	WO #	Asset #	PM #	Manufacturer	Model Number	Serial #	Asset Description	Asset Location
NY023-118	17893	9273	PM-AN-9273				J-26 1-pc Janitor Sink, Wall Mounted Rm 1007	
NY023-118	17894	9274	PM-AN-9274				J-26 2-pc Lavatory, Wall Mounted Rm 1006	
NY023-118	17895	9275	PM-AN-9275				J-26 1-pc Toilet, Flush Valve, Wall Mounted Rm 1006	
NY023-118	17896	9276	PM-AN-9276				J-26 2-pc Lavatory, Wall Mounted Rm 1000	
NY023-118	17897	9277	PM-AN-9277				J-26 1-pc Urinal, Wet, Flush Valve Rm 1000	
NY023-118	17898	9278	PM-AN-9278				J-26 1-pc Toilet, Flush Valve, Wall Mounted Rm 1000	

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)	
		YES	NO	SPECIAL INSTRUCTIONS	
SPECIAL INSTRUCTIONS					
1	In addition to the procedure(s) outlined in this standard, the equipment manufacturer's recommended maintenance procedure(s) and/or instruction(s) shall be strictly adhered.	✓	/		
2	Review manufacturer's instructions.	✓	/		

3	Follow lock out/tag out procedures at all times. De-energize or discharge all hydraulic, electrical, mechanical, or thermal energy prior to beginning work.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<b>TO BE PERFORMED AT EACH INSPECTION SERVICE</b>				
1	SINKS - Operate faucets, inspect for leaks, replace washers/"O" rings as necessary. Observe drain flow, clean trap if obstructed. Replace filter as needed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2	SHOWER HEADS, MIXING VALVES - Check shower for damaged, missing, or leaking heads; replace as required. Check mixing valves for damaged or missing parts; replace washers as needed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3	SHOWER STALLS - Check for leaks, cracks, significant wear or vandalism.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4	TOILETS - Flush and adjust water flow if required. Inspect for leaks, missing or damaged parts/caps, seat supports, and replace.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5	URINALS - Flush and adjust water flow if required. Inspect for leaks, missing or damaged parts/caps and replace.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
6	OTHER MISCELLANEOUS FIXTURES - Clean and inspect for any damage. Check for leaks, missing or damaged parts, caps, etc. Replace as needed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

Note: The Contractor shall perform any repairs identified during PM up to \$250 (direct labor and direct material cost) per PM occurrence.

Checklist compiled in accordance with:

- Original equipment manufacturers (OEM) documentation for exact or similar assets, which can be located at [\(Provide Link to OEM Manual/Asset Library\)](#)

**Additional Notes:**

\* Asset # 9276 needs a new faucet.  
Asset # 9274 cold water line leaking.

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\* (Asset # 9275) when flushed toilet leaks water, gasket needs to be replaced and sealed back up.