

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

SITE AND BLDG #: **NY126N01****MECHANIC****SIGNATURE:**James R Groft Jr**DATE:**08/26/2024**LOCATION/RM #:****WO# 16292****ASSET #6805****START TIME:****FINISH TIME:**

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.	X		
2	Only approved cleaning chemicals shall be used.	X		
<b>TO BE PERFORMED AT EACH INSPECTION</b>				
1	Check with operating or area personnel for any deficiencies; verify cleaning program.	X		
2	Visually check for refrigerant, oil and water leaks.	X		
3	Inspect ice condition/size.	X		
4	Clean air filter	X		
5	As needed, drain and clean unit with proper ice machine cleaning solution. Drain and clean at a minimum of annually.		X	UNIT IS POWERED ON BUT SET TO OFF AND HAS NO WATER IN THE SYSTEM AT THIS TIME, IT HAS NOT BEEN IN USE SINCE FEBRUARY WHICH WAS THE LAST PM DATE
6	Check date on water filter, Replace as needed. Water filters should be changed annually at a minimum.	X		
7	Check and tighten any loose screw-type electrical connections.	X		
8	Check all controls; adjust if necessary.	X		
9	Examine water connection; open and close water valve; test ice dispensing valve and (door) metering adjustment.	X		
10	Check and clear ice machine draining system (drain vent, strainer, trap).	X		
11	Examine condition of bin doors-closure, hinges, gaskets, handles and ease of slide; lubricate as required. Check storage bin condition.	X		
12	Clean motor, compressor, and condenser coil.	X		



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:**