

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
PLUMBING FIXTURES

SITE AND BLDG #: Albany 001		MECHANIC SIGNATURE: 	DATE: 9/7/2021
LOCATION/RM #: building WO# 9066		START TIME: 1230	FINISH TIME: 1300
CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
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.	<input checked="" type="checkbox"/>	
TO BE PERFORMED AT EACH INSPECTION SERVICE			
1	SINKS - Operate faucets, inspect for leaks, replace washers/"O" rings as necessary. Observe drain flow, clean trap if obstructed. Replace filter as needed.		
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.		
3	SHOWER STALLS - Check for leaks, cracks, significant wear or vandalism.		
4	TOILETS - Flush and adjust water flow if required. Inspect for leaks, missing or damaged parts/caps, seat supports, and replace.		
5	URINALS - Flush and adjust water flow if required. Inspect for leaks, missing or damaged parts/caps and replace.		
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"/>	contractor stated he couldn't work on

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: