

# PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST

## FILTER REPLACEMENT

**SITE AND BLDG #:** VA049-02

**MECHANIC SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**LOCATION/RM #:** \_\_\_\_\_ **WO#** 10270

**START TIME:** \_\_\_\_\_ **FINISH TIME:** \_\_\_\_\_

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS  (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)
		YES	NO	
TO BE PERFORMED AT EACH INSPECTION SERVICE				
1	Check, clean, and/or replace filters as required.			
2	Initial and Date Filter (if disposable)			
3	Initial and Date Yellow Maintenance Tag (if applicable)			
ASSET #	SIZE	QTY		NOTES/ ACTIONS
2332				
2333				

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 Technician

**Additional Notes:**