

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
FILTER REPLACEMENT

MECHANIC

SIGNATURE: Troy **DATE:** 6/19/19

LOCATION/RM #: WO# 8871 **START TIME:** 11 am **FINISH TIME:** 12 pm

SITE AND BLDG #: VA099-02

LOCATION/RM #: WO# 8871

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.	X		Replaced all filters
2	Initial and Date Filter (if disposable)	X		Dated all filters
3	Initial and Date Yellow Maintenance Tag (if applicable)	X		
ASSET #	SIZE	QTY		NOTES/ ACTIONS
2391	16X24X2	6		

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: