

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST **FILTER REPLACEMENT**

SITE AND BLDG #: WV016-01

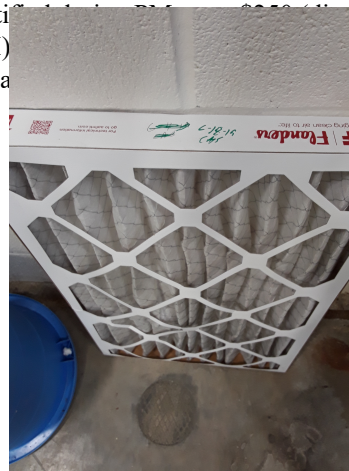
MECHANIC SIGNATURE: Geo. E. A- **DATE:** 07 AUG 19

LOCATION/RM #: WO# 10177

START TIME: 10:30A **FINISH TIME:** 11:30A

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETE		NOTES/ ACTIONS <small>(IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION)</small>
		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
3010	(10) 16x25x2 MERU 8	10		CHANGED ALL REPLACABLE FILTERS
3011				
3012				
3025				WASHED ALL WASHABLE FILTERS
3026				
3027				
3028				
3111				
3112				
3113				
3124				
3125				

Note: For any deficiencies found
 exceed repairs identified by the technician. For any deficiencies found
 To be performed by the technician. For any deficiencies found
 Additional labor and direct materials. For any deficiencies found
 Add: For any deficiencies found
 For any deficiencies found



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