

## **PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST RANGE**

**ACTIVITY AND BLDG #:** NY001 - 01 **Main Building**

## MECHANIC

SIGNATURE: Christopher N Pothier DATE: 1 - 28 - 20

**LOCATION/RM #:** Kitchen **WO#** 6618 **ASSET #** 9030

**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	Notify cafeteria operator and get permission prior to performing all maintenance.			
2	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.			See Notes
3	De-energize, lock out, and tag electrical circuits and fuel service.			
<b>TO BE PERFORMED AT EACH INSPECTION SERVICE</b>				
1	Check with operating or area personnel for any deficiencies; verify cleaning program.			
2	Check all controls, mechanisms for proper operation; adjust as required.			
3	Examine utility supply line, piping, valve packing, specialties, and insulation; look for leaks.			See Notes
4	Check electric power line condition, switch, disconnect, etc.; or check condition of gas supply, valves, regulators, and inspect pilot, check for Gas leaks.			
5	Examine burner guards, covers or cook top surfaces for cracks or damage.			
6	Clean and adjust gas burners and pilot light assembly.			See Notes
7	Clean electric heating elements and check amperage against nameplate.			
8	Examine handles, knobs and controls for tightness and safe condition.			
9	Check automatic burner lighters and safety controls.			
10	Lubricate gas valves.			
11	Check electric power line condition (switch, disconnect, etc.), or check condition of gas supply, valves, regulators.			See Notes

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:**

The gas has been shut off to this unit so it will not function. Unit is clean and in good shape.