

**PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST**  
**MISCELLANEOUS KITCHEN EQUIPMENT**

**ACTIVITY AND BLDG #:** NY059 - 01 **Main Building**

**MECHANIC**  
**SIGNATURE:** *Christopher N Pothier* **DATE:** 1 - 2 - 20

**LOCATION/RM #:** Break room **WO#** 6539 **ASSET #** 10382

**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.	X		
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.	X		
3	De-energize, lock out, and tag electrical circuits and fuel service.	X		
<b>TO BE PERFORMED AT EACH INSPECTION SERVICE</b>				
1	Check with operator or manager for any deficiencies, verify cleaning program.	X		
2	Check all controls, mechanisms for proper operation; adjust as required.	X		
3	If applicable, examine utility supply line, piping, valve packing, specialties, and insulation; look for any leaks.		X	Unit is a microwave
4	If applicable, check electric power line condition, switch, disconnect, etc.; or check condition of gas supply, valves, regulators, and inspect pilot, check for Gas leaks.	X		
5	Ensure unit is clean and in working order. Note any deficiencies.	X		

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:**