

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST

PLUMBING FIXTURES

SITE AND BLDG #: 14024 - 208 **MECHANIC SIGNATURE:** M. Munoz **DATE:** 7/27/19

LOCATION/RM #: _____ **WO#** _____ **ASSET #** _____ **START TIME:** _____ **FINISH TIME:** _____

CHECK POINT	CHECKPOINT DESCRIPTION	TASK COMPLETED		NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED AND PROVIDE EXPLANATION)
		YES	NO	
1	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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	TO BE PERFORMED AT EACH INSPECTION SERVICE
1	SINKS - Operate faucets, inspect for leaks, replace washers/"O" rings as necessary. Observe drain flow, clean trap if obstructed. Replace filter as needed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2	SHOWER HEADS, MIXING VALVES - Check shower for damaged, missing, or leaking heads; replace as required. Check mixing valves for damaged or missing parts; replace washers as needed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3	SHOWER STALLS - Check for leaks, cracks, significant wear or vandalism.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4	TOILETS - Flush and adjust water flow if required. Inspect for leaks, missing or damaged parts/caps, seat supports, and replace.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5	URINALS - Flush and adjust water flow if required. Inspect for leaks, missing or damaged parts/caps and replace.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
6	OTHER MISCELLANEOUS FIXTURES - Clean and inspect for any damage. Check for leaks, missing or damaged parts, caps, etc. Replace as needed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	YES. CLEAN PLUMBING ASSESSMENT: <u>W.U. 1st floor new room</u>

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:

ASSESSMENT - W.U. 1st floor new room

PK-AH-9652 - 4446
 PK-AH-9659 - 4455
 PK-AH-9661 - 4457
 PK-AH-9663 - 4459
 PK-AH-9667 - 4463
 PK-AH-9669 - 4465

ASSESSMENT - W.U. 1st floor new room

PK-AH-9675 - 4471
 PK-AH-9676 - 4472