Industrial Equipment

Worksheet # _____

Service Contract # _____

Purchase Order _____

830 Cherry Street
Chico, CA 95928

PH: (800)287-8306
FAX: (530)893-1035

Servicing The North State

PREVENTATIVE MAINTENANCE WORKSHEET

Aqueous Parts Cabinet Washer

Customer _____ Contact Person _____

Street _____ Phone Number _____

City _____ Unit Make/model _____

State _____ Zip _____ Serial Number _____

ITEM INSPECTED:

Check Oil Skimmer	Good	Test soap Level	Good
Test Timer Count Down	Good	Check pump	Good
Check Nozzles Alignment & Adjust	Good	Check Heating Element	Good
Check Nozzles for Damage, Wear & Debris	Good	Check Hoses & Connections	Good
Inspect All Wiring for Loose Connections	Good	Check all switches & Lights	Good
Adjust Spray Bar Alignment (if Applicable)	Good	Check & Clean Water Filter (if appl.)	Good
Minor Adjustments to Ensure Proper OP	Good	Test Door Safety Switch	Good
Check and Adjust Door Switches	Good	Check & Adjust Turntable	Good

Check & Set Automatic Timer Properly for Heat & Skimmer Good

Remove Sludge & Adjust Detergent Concentration (if option is requested*) _____

*** Store Slurry in DOT Provided Waste Drum on Site**

ADDITIONAL PARTS USED

Invoice # _____

_____

Sevice Contract Agreement _____ per Visit

Additional Labor 0.0 hours at _____ per Hour

Quantity	Part Number	Description

Customer Rep _____ Date 6/13/2008

Work Performed By _____