WEEKLY MAINTANANCE CHECKLIST

ROOM NUMBER/NAME:	Workshop No. 1				MACHINE NUMBER:		Disc Sander 004					
ACADEMIC YEAR:	2019 / 20 - Term 1	WEEK:	13	14	15	16	17	18	19	20	21	22	23	24
• The condition of the sanding ~~belt~~/disc/~~drum~~			Good	Ok	Bad*	Good								
• ~~Tension of belt~~/adhesion of the disc/~~Tightness to drum~~			Good	Good	Good	Good								
• Agitate the LEV filters			Yes	Yes	Yes	Yes								
• Empty LEV tray/bin			Yes	Yes	Yes	Yes								
• Clean sanding ~~belt~~/disc/~~drum~~ with compound cleaner			Yes	Yes	No*	Yes								
• Carry out an emergency stop test			Yes	Yes	Yes	Yes								
• C			Yes	No*	Yes	Yes								
• C	ding ~~belt~~/disc/~~drum~~		Yes	Yes	Yes	No*								
		DATE:	1/2/20	8/2/20	15/2/20	22/2/20								
		RRIED OUT INSPECTION:	MRE	MRE	MRE	MRE								
		F HEAD OF DEPARTMENT	-	-	-	AB								

PLEASE INSERT A **YES** OR **NO** IN EACH BOX. IF A **NO** IS INSERTED ADDITIONAL INFORMATION IS REQUIRED IN THE RELATED BOX BELOW.

Personalise the statements to suit the type of machine the booklet relates too.

This is a sample page of how to fill in the individual sheets.

This should done every week.

Head of Department should review as and when appropriate.

COMMENTS RELATED TO CHECKS CARRIED OUT ANDINFORMATION AS REQUIRED:

WEEK 13:	WEEK 14:	WEEK 15:	WEEK 16:	WEEK 17:	WEEK 18:
N/A	Upper quadrant guard removed - now replaced. ***AB*** *(H of D)* to issue a reminder to all users that guard should be in place.	Abrasive disc clogged and in need of replacement. Replaced with 60 grit disc.	Gap between working t (machine be unsafe. Mov re-fixe		
WEEK 19:	**WEEK 20:**	**WEEK 21:**	**WEEK 22:**		**WEEK 24:**

If an issue is identified (*), a comment should be entered as appropriate.

EXAMPLE PAGE

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