Facility Maintenance Checklist

| Location: | | Date: | |
|--|------------|--------------|---------|
| Facility Exterior | Acceptable | Unacceptable | Remarks |
| General | | | |
| 1. Overall appearance | | | |
| 2. Concrete drive and parking lots | | | |
| 3. Concrete sidewalks, steps, and landings | | | |
| 4. Sign, damaged? Visible? | | | |
| 5. Trees and other plantings, trimmed? Alive? | | | |
| 6. Lawn, mowed? Trimmed? Bare spots? Weeds? | | | |
| Roof | | | |
| 1. Visible problems? Loose panels? Sagging gutters? | | | |
| 2. Recent high winds? Heavy snows? Hard rains? | | | |
| 3. Heat tape working? Breakers functioning properly? | | | |
| Doors and Windows | | | |
| 1. Are all doors operating safely? Securely? | | | |
| 2. Any broken windows? | | | |
| 3. Are all doors locked working properly? | | | |
| 4. Are the automatic openers working properly? | | | |
| Lighting | | | |
| 1. Are all exterior lights and power receptacles working properly? | | | |
| 2. Are the sign and flag lights working properly? | | | |
| Notes: | | | |
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Location:

Date:

| Facility Interior | Acceptable | Unacceptable | Remarks |
|---|------------|--------------|---------|
| General | | | |
| 1. Carpets, need cleaning? Repair? | | | |
| 2. Tile floors, need cleaning? Repair? | | | |
| 3. Windows, dirty?, cracked?, air leakage? | | | |
| 4. Walls, damage?, stains?, paint touchup? | | | |
| 5. Ceiling tiles?, missing?, water stained? | | | |
| Doors and Windows | | | |
| 1. Doors opening and closing properly? | | | |
| 2. Latches and panic bars working properly? | | | |
| 3. Door locks functional? | | | |
| Electrical | | | |
| 1. Are all lights working? Bulbs burned out? | | | |
| 2. Are light switches operating properly? | | | |
| 3. Do the diffusers need cleaning? | | | |
| 4. Are GFI outlets operating properly? | | | |
| 5. Are all other outlets working properly? Burnt or flash marks? | | | |
| 6. Are nighttime security lights working properly? | | | |
| Plumbing | | | |
| 1. All lavatory faucets working correctly? Leaking? Broken? | | | |
| 2. All kitchen faucets working properly? Leaking? Broken? | | | |
| 3. All sinks draining properly? | | | |
| 4. Any leaks under the sinks? | | | |
| 5. All toilets working properly? Flushing properly? Shutting off? | | | |

Location:

Date:

| Facility Interior (Continued) | Acceptable | Unacceptable | Remarks |
|--|------------|--------------|---------|
| Heating/Air Conditioning | | | |
| 1. Seasonal general inspection of heating/cooling system | | | |
| 2. Boiler working? | | | |
| 3. Furnaces working? | | | |
| 4. Are ceiling blowers working? Leaking? | | | |
| 5. Are thermostats working properly? | | | |
| 6. Any leaks in fluid circulation lines? | | | |
| 7. Any condensation leaks in conventional system? | | | |
| 8. Furnace filters need cleaning or changing? | | | |
| 9. Air handling filters need cleaning or changing? | | | |
| Notes: | | | |