**Maintenance and Operation Department**

# Weekly Periodic Preventive Maintenance for Chillers Form

| Building Name and No.: | | | |
|---|---|---|---|
| **Maintenance Action** | | **Maintenance Status** | **Notes** |
| **Compressor** | **Oil Level** | | |
| | **Oil Pressure**<br>**Oil Temperature** | | |
| **Cooler** | **Refrigeration Freon Pressure** | | |
| | **Liquid Flow Rate** | | |
| **Condenser** | **Refrigeration Discharge Pressure** | | |
| | **Refrigeration Corresponding Temperature** | | |
| | **Water/ Flow Rate** | | |
| | **Unusual Sounds or Vibration** | | |
| | | | |
| **Site Supervisor** | | **Technician** | |
| **Name:** | | **Name:** | |
| **Signature:** | | **Signature:** | |

Number: _____ Date: _____