

[organization name]

Appendix 2 – Plan for Preventive Maintenance of Equipment

Commented [AES1]: If the organization uses electronic

Equipment name	Type of maintenance	Maintenance term											
		Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec

Commented [AES2]: Write in appropriate box

Legend:

- Planned maintenance
- Actual maintenance

[job title]

[name]

[signature]

Commented [AES3]: Only necessary if the Procedure for Document and Record Control prescribes that paper documents must be signed.