

COOLING TOWER PREVENTIVE MAINTENANCE REPORT

Date(s) of PM:	JOB SITE DETAILS
Visiting Engineer:	Site name:
Tower Model No.(s):	Site address:
Tower Serial No.(s):	Contact Name
	Telephone No.:

SAFETY INSTRUCTIONS
<p>Fan and pump motors must be isolated and locked off and hazard signs displayed prior to any inspection or maintenance work. Suitable PPE must be worn at all times.</p> <p>In the event of a contaminated or dirty unit it must be pre-disinfected in accordance with Wisconsin Protocol.</p>

INSPECTION AND MAINTENANCE RECORD

[A] LAYOUT AND OPERATION	Yes	No	REMARKS/ COMMENTS
Unobstructed access around unit(s)	<input type="checkbox"/>	<input type="checkbox"/>	
High level access platform fitted	<input type="checkbox"/>	<input type="checkbox"/>	
Internal service platform fitted	<input type="checkbox"/>	<input type="checkbox"/>	
Safe access to top of unit	<input type="checkbox"/>	<input type="checkbox"/>	
Visible drift or windage losses	<input type="checkbox"/>	<input type="checkbox"/>	
Abnormal fan drive vibration/noise	<input type="checkbox"/>	<input type="checkbox"/>	
[B] PRELIMINARIES	Yes	No	REMARKS/ COMMENTS
All fan and pump motors isolated and locked off	<input type="checkbox"/>	<input type="checkbox"/>	
Pre-chlorination carried out	<input type="checkbox"/>	<input type="checkbox"/>	
[C] CONDITION INSPECTION	OK	NOT OK	REMARKS/ COMMENTS
External corrosion protection	<input type="checkbox"/>	<input type="checkbox"/>	
Internal corrosion protection	<input type="checkbox"/>	<input type="checkbox"/>	
Leaks - sump	<input type="checkbox"/>	<input type="checkbox"/>	
Leaks - casing	<input type="checkbox"/>	<input type="checkbox"/>	
Drift eliminators	<input type="checkbox"/>	<input type="checkbox"/>	
Water distribution/nozzles	<input type="checkbox"/>	<input type="checkbox"/>	
Fill pack(s)	<input type="checkbox"/>	<input type="checkbox"/>	
Coil(s)	<input type="checkbox"/>	<input type="checkbox"/>	
Finned coil(s)	<input type="checkbox"/>	<input type="checkbox"/>	
Louvres/combined inlet shields	<input type="checkbox"/>	<input type="checkbox"/>	
Sound attenuation baffles - intake	<input type="checkbox"/>	<input type="checkbox"/>	
Sound attenuation baffles - discharge	<input type="checkbox"/>	<input type="checkbox"/>	
Fan wheels, axial fans	<input type="checkbox"/>	<input type="checkbox"/>	
Fan drive corrosion protection	<input type="checkbox"/>	<input type="checkbox"/>	
Fan screens	<input type="checkbox"/>	<input type="checkbox"/>	
[D] MECHANICAL MAINTENANCE	OK	NOT OK	REMARKS/ COMMENTS
Fan shaft bearings - condition and lubrication	<input type="checkbox"/>	<input type="checkbox"/>	
Fan shaft bearing locking collars - check	<input type="checkbox"/>	<input type="checkbox"/>	
Pulleys and bushings - alignment	<input type="checkbox"/>	<input type="checkbox"/>	
Fan belts - condition and tension	<input type="checkbox"/>	<input type="checkbox"/>	
Motor base and adjustment - condition and lubrication	<input type="checkbox"/>	<input type="checkbox"/>	
Gear box - oil level	<input type="checkbox"/>	<input type="checkbox"/>	
Make-up valve and float - adjustment	<input type="checkbox"/>	<input type="checkbox"/>	
Electric water level control - check	<input type="checkbox"/>	<input type="checkbox"/>	
Make-up solenoid valve - check	<input type="checkbox"/>	<input type="checkbox"/>	
Manual bleed valve - check	<input type="checkbox"/>	<input type="checkbox"/>	
Sump heater(s) - check	<input type="checkbox"/>	<input type="checkbox"/>	
Thermostat(s) - check	<input type="checkbox"/>	<input type="checkbox"/>	
Low level switch(es) - check	<input type="checkbox"/>	<input type="checkbox"/>	

[D] MECHANICAL MAINTENANCE	OK	NOT OK	REMARKS/ COMMENTS					
3-way valve and actuator – check	<input type="checkbox"/>	<input type="checkbox"/>						
Fan motor(s) – check condition, noise	<input type="checkbox"/>	<input type="checkbox"/>						
Fan motors – Amperes measurement: See [J] Motor	<input type="checkbox"/>	<input type="checkbox"/>						
Measurements if applicable	<input type="checkbox"/>	<input type="checkbox"/>						
Pump(s) – check condition & rotation direction	<input type="checkbox"/>	<input type="checkbox"/>						
Pump motor(s) – check condition, noise	<input type="checkbox"/>	<input type="checkbox"/>						
Pump seal(s) – check	<input type="checkbox"/>	<input type="checkbox"/>						
Sump – clean	<input type="checkbox"/>	<input type="checkbox"/>						
Sump strainer – clean	<input type="checkbox"/>	<input type="checkbox"/>						
Hot water basin and strainer – clean	<input type="checkbox"/>	<input type="checkbox"/>						
Sump water level – check	<input type="checkbox"/>	<input type="checkbox"/>						
Drain and overflow – clear	<input type="checkbox"/>	<input type="checkbox"/>						
Vibration cut out switch(es) – check	<input type="checkbox"/>	<input type="checkbox"/>						
Access door gaskets – check	<input type="checkbox"/>	<input type="checkbox"/>						
Modulating dampers and control – check/adjust	<input type="checkbox"/>	<input type="checkbox"/>						
[E] SIDESTREAM FILTRATION	OK	NOT OK	REMARKS/ COMMENTS					
Filtration pre-strainer – clean	<input type="checkbox"/>	<input type="checkbox"/>						
Filtration purge cycle – check	<input type="checkbox"/>	<input type="checkbox"/>						
Separator pressure differential – check	<input type="checkbox"/>	<input type="checkbox"/>						
Filtration piping – check for leaks	<input type="checkbox"/>	<input type="checkbox"/>						
Sump sweeper pipework and jets – check/clean	<input type="checkbox"/>	<input type="checkbox"/>						
[F] (TWICE) YEARLY CLEAN & DISINFECTION	OK	NOT OK	REMARKS/ COMMENTS					
Mechanical cleaning of unit	<input type="checkbox"/>	<input type="checkbox"/>						
Disinfection (see separate report, refer to detailed method statements and reports on cleaning and disinfection)	<input type="checkbox"/>	<input type="checkbox"/>						
[G] WATER TREATMENT EQUIPMENT	YES	NO	REMARKS/ COMMENTS					
Water treatment: in place	<input type="checkbox"/>	<input type="checkbox"/>						
* Softner	<input type="checkbox"/>	<input type="checkbox"/>						
* Automatic blow down / operation	<input type="checkbox"/>	<input type="checkbox"/>						
* Dosing equipment + No. pumps	<input type="checkbox"/>	<input type="checkbox"/>						
[H] ANTI-VIBRATION RAILS/ MOUNTS	YES	NO	REMARKS/ COMMENTS					
External corrosion protection – check	<input type="checkbox"/>	<input type="checkbox"/>						
Abnormal tilt – check	<input type="checkbox"/>	<input type="checkbox"/>						
Springs – check	<input type="checkbox"/>	<input type="checkbox"/>						
[I] POST MAINTENANCE	YES	NO	REMARKS/ COMMENTS					
Unit fully re-assembled and operational	<input type="checkbox"/>	<input type="checkbox"/>						
Post-chlorination carried out	<input type="checkbox"/>	<input type="checkbox"/>						
Intervention registered in site Log Book	<input type="checkbox"/>	<input type="checkbox"/>						
[J] MOTOR MEASUREMENT(S)								
	Fan Motor 1		Fan Motor 2		Fan Motor 3		Fan Motor 4	
	I(A)	U(V)	I(A)	U(V)	I(A)	U(V)	I(A)	U(V)
Phase 1								
Phase 2								
Phase 3								
[K] RECOMMENDED ACTIONS								

SIGNATURES (Denoting completion and acceptance of Maintenance Visit/Site Inspection Report)

EAI Technician/Engineer	Date	Client	Date