

Blank Electrical Equipment Maintenance Report

Date

Report No.

Location

Equipment Details

Equipment Name

Equipment ID/No.

Manufacturer

Year of Manufacture

Description of Maintenance Performed

Inspection and Testing

Item Checked	Status	Comments
e.g. Wiring, Switches	OK/Not OK	

Remarks

Maintenance Performed By

Name & Signature

Reviewed By

Name & Signature

Date