



East Shore Road Semi Annual PMs

Semi - Annual Months: January - June 2010

East Shore Road

Headworks ✓

Basement

-Grit Pumps

Initial	Date
VZ	1/21

Check and Adjust Belts

Primary Pump House

-Change Oil in Plunger

Initial	Date
VZ	1/21

-Adjust Connecting

Rods

Initial	Date
VZ	1/21

-Inspect Check

Balls

Initial	Date
VZ	1/21

Roof Valves

Dismantle and Clean
(As Needed)

Initial	Date
VZ	1/21

Digesters ✓

Roof

-Grease Cover Rollers

Initial	Date
VZ	2/24 ①

-Grease Bearings

Initial	Date
VZ	3/4

Main Floor ✓

Boilers

Check and Record
Temperature

Initial	Date	Temperature	
VZ	1/21	152°F	#1
VZ	1/21	140°F	#3

Basement

-Exercise All Valves

Initial	Date
VZ	1/21

-Clean and Flush
Sump Pit

Initial	Date
VZ	1/21

De-Watering Building ✓

Basement

-Change Oil in Plungers

Initial	Date
VZ	2/24

-Re-Circulation
Grease Bearings

Initial	Date
VZ	2/24

-Clean and Flush
Sump Pit

Initial	Date
VZ	1/21

Administration Building ✓

Roof

-Exhaust Fans

Check Operation

Initial	Date
VZ	3/31

-Grease Bearings

Initial	Date
VZ	3/31

Sand Filters

Hypo Bath

Gal. of Hypo

Initial	Date
VZ	3/2

Initial	Date
VZ	3/9

① Some rollers frozen on dis 1 + 3 roofs



East Shore Road Semi Annual PMs

January - June 2010

Primary Tanks

Tank 1 (NORTH)

-Pump Down Tanks

Yes	No	Initial	Date
<input checked="" type="checkbox"/>	<input type="checkbox"/>	vr	5/7

Chain Pins

-Inspected?	Yes	No	Initial	Date	<table border="1"> <tr> <td></td> <td>North Side</td> <td>South Side</td> </tr> <tr> <td>Amount:</td> <td>0</td> <td>3</td> </tr> <tr> <td>Total Replaced:</td> <td colspan="2">3</td> </tr> </table>		North Side	South Side	Amount:	0	3	Total Replaced:	3	
	North Side	South Side												
Amount:	0	3												
Total Replaced:	3													
-Replaced?	<input checked="" type="checkbox"/>	<input type="checkbox"/>												

-Grit Present?	Yes	No	Initial	If Yes...	Little	Moderate	Heavy
-Check for Grit	<input checked="" type="checkbox"/>	<input type="checkbox"/>	vr	Little, Moderate or Heavy?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<small>(check off one box)</small>							
-Caulking	Yes	No	Initial	Condition of Caulking...	Good	Fair	Poor
-Caulking Replaced?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	vr	Good, Fair or Poor?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<small>(check off one box)</small>							
-Weirs	Yes	No	Initial	-Duration Off Line	# of Hours	Initial	
-Inspect Weirs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	vr	-In Hours	7	vr	

Shoes

- Inspected?	Yes	No	Initial	Date										
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	vr	5/7										
- Carry Shoe	Yes	No	Initial											
- Inspected?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	5/7											
- Replaced?	Yes	No			<table border="1"> <tr> <td></td> <td>North Side</td> <td>South Side</td> </tr> <tr> <td>Amount</td> <td></td> <td></td> </tr> <tr> <td>Number Replaced</td> <td colspan="2"></td> </tr> </table>		North Side	South Side	Amount			Number Replaced		
	North Side	South Side												
Amount														
Number Replaced														
	<input type="checkbox"/>	<input checked="" type="checkbox"/>												
- Rotated?	Yes	No	Initial											
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	vr											
- Stainless Steel Hardware ?	Yes	No	Initial											
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	vr											
				If No...	Yes	No	Initial	Date						
				Hardware Replaced?	<input type="checkbox"/>	<input type="checkbox"/>								

Chains

-Check Chain Tension	Yes	No	Initial	Date	-Chains Adjusted?	Yes	No	Initial
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	vr	5/7		<input type="checkbox"/>	<input checked="" type="checkbox"/>	vr
-Drive Chain					-Flight Chains			
Set #	Initial	Date			Set #	Initial	Date	
1	vr	5/7			1	vr	5/7	
2					2	vr	5/7	
3					3	X	Y	

S.A. East Shore Road - 2 ✓



East Shore Road Semi Annual PMs

January - June 2010

Tank 2 (MIDDLE)

-Pump Down Tanks

Yes	No	Initial	Date
<input checked="" type="checkbox"/>	<input type="checkbox"/>	VR	4/20

Chain Pins

-Inspected?

Yes	No	Initial	Date
<input checked="" type="checkbox"/>	<input type="checkbox"/>	VR	4/20

-Replaced?

Yes	No	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	→

	North Side	South Side
Amount:	<input type="text"/>	<input type="text"/>
Total Replaced:	<input type="text"/>	

-Grit Present?

Yes	No	Initial
<input checked="" type="checkbox"/>	<input type="checkbox"/>	VR

-Check for Grit

-Caulking

Yes	No	Initial
<input type="checkbox"/>	<input checked="" type="checkbox"/>	VR

-Caulking Replaced?

-Weirs

Yes	No	Initial
<input checked="" type="checkbox"/>	<input type="checkbox"/>	VR

-Inspect Weirs

If Yes...

Little	Moderate	Heavy
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Little, Moderate or Heavy?

(check off one box)

Condition of Caulking...

Good	Fair	Poor
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Good, Fair or Poor?

(check off one box)

-Duration Off Line

# of Hours	Initial
8	VR

-In Hours

Shoes

- Inspected?

Yes	No	Initial	Date
<input checked="" type="checkbox"/>	<input type="checkbox"/>	VR	4/20

-Carry Shoe

Yes	No	Initial
<input checked="" type="checkbox"/>	<input type="checkbox"/>	VR

- Inspected?

- Replaced?

Yes	No	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	→

-Rotated?

Yes	No	Initial
<input type="checkbox"/>	<input checked="" type="checkbox"/>	VR

-Stainless Steel

Yes	No	Initial
<input checked="" type="checkbox"/>	<input type="checkbox"/>	VR

Hardware ?

	North Side	South Side
Amount	<input type="text"/>	<input type="text"/>
Number Replaced	<input type="text"/>	

If No...

Yes	No	Initial	Date
<input type="checkbox"/>	<input type="checkbox"/>		

Hardware Replaced?

Chains

-Check Chain Tension

Yes	No	Initial	Date
<input checked="" type="checkbox"/>	<input type="checkbox"/>	VR	4/20

-Chains Adjusted?

Yes	No	Initial
<input type="checkbox"/>	<input checked="" type="checkbox"/>	VR

Drive Train

Set #	Initial	Date
1	VR	4/20
2	VR	4/20
3	VR	4/20

Flight Chains

Set #	Initial	Date
1	VR	4/20
2	VR	4/20
3	VR	4/20

S.A. East Shore Road - 3 ✓



East Shore Road Semi Annual PMs

January - June 2010

Tank 3 (SOUTH)

-Pump Down Tanks

Yes	No	Initial	Date
<input checked="" type="checkbox"/>	<input type="checkbox"/>	V2	4/13

Chain Pins

Yes	No	Initial	Date
<input checked="" type="checkbox"/>	<input type="checkbox"/>	V2	4/13

-Inspected?

Yes	No
<input type="checkbox"/>	<input checked="" type="checkbox"/>

-Replaced?

→

	North Side	South Side
Amount:	<input type="text"/>	<input type="text"/>
Total Replaced:	<input type="text"/>	

-Grit Present?

Yes	No	Initial
<input checked="" type="checkbox"/>	<input type="checkbox"/>	V2

-Check for Grit

If Yes...	Little	Moderate	Heavy
Little, Moderate or Heavy?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

-Caulking

Yes	No	Initial
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	V2

-Caulking Replaced?

Condition of Caulking...	Good	Fair	Poor
Good, Fair or Poor?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

-Weirs

Yes	No	Initial
<input checked="" type="checkbox"/>	<input type="checkbox"/>	

-Inspect Weirs

-Duration Off Line	# of Hours	Initial
-In Hours	6	V2

Shoes

Yes	No	Initial	Date
<input checked="" type="checkbox"/>	<input type="checkbox"/>	V2	4/13

-Inspected?

-Cary Shoe

Yes	No	Initial
<input checked="" type="checkbox"/>	<input type="checkbox"/>	V2

-Inspected?

-Replaced?

Yes	No
<input type="checkbox"/>	<input checked="" type="checkbox"/>

⇒

	North Side	South Side
Amount	<input type="text"/>	<input type="text"/>
Number Replaced	<input type="text"/>	

-Rotated?

Yes	No	Initial
<input type="checkbox"/>	<input checked="" type="checkbox"/>	V2

-Stainless Steel

Yes	No	Initial
<input checked="" type="checkbox"/>	<input type="checkbox"/>	

Hardware ?

If No...	Yes	No	Initial	Date
Hardware Replaced?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	V2	4/13

Chains

Yes	No	Initial	Date
<input checked="" type="checkbox"/>	<input type="checkbox"/>	V2	4/13

-Check Chain Tension

Yes	No	Initial
<input type="checkbox"/>	<input checked="" type="checkbox"/>	V2

-Chains Adjusted?

-Drive Train

Set #	Initial	Date
1	V2	4/13
2	X	X
3	X	X

-Flight Chains

Set #	Initial	Date
1	V2	4/13
2	V2	4/13
3	X	X



East Shore Road Semi Annual PMs

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Tank 4A (NEW)

-Pump Down Tanks

Yes	No	Initial	Date
<input checked="" type="checkbox"/>	<input type="checkbox"/>	VL	5/14

Chain Pins

Yes	No	Initial	Date
<input checked="" type="checkbox"/>	<input type="checkbox"/>	VL	5/14

Yes	No	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	⇒

	North Side	South Side
Amount:	<input type="text"/>	<input type="text"/>
Total Replaced:	<input type="text"/>	

Yes	No	Initial
<input checked="" type="checkbox"/>	<input type="checkbox"/>	VL

If Yes... Little, Moderate or Heavy?	Little	Moderate	Heavy
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Yes	No	Initial
<input type="checkbox"/>	<input checked="" type="checkbox"/>	VL

Condition of Caulking...	Good	Fair	Poor
Good, Fair or Poor?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Yes	No	Initial
<input checked="" type="checkbox"/>	<input type="checkbox"/>	VL

# of Hours	Initial
6	VL

Shoes

Yes	No	Initial	Date
<input checked="" type="checkbox"/>	<input type="checkbox"/>	VL	5/14

Yes	No	Initial
<input checked="" type="checkbox"/>	<input type="checkbox"/>	VL

Yes	No	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	⇒

	North Side	South Side
Amount	<input type="text"/>	<input type="text"/>
Number Replaced	<input type="text"/>	

Yes	No	Initial
<input type="checkbox"/>	<input checked="" type="checkbox"/>	VL

Yes	No	Initial	Date	If No... Hardware Replaced?	Yes	No	Initial	Date
<input checked="" type="checkbox"/>	<input type="checkbox"/>	VL			<input type="checkbox"/>	<input checked="" type="checkbox"/>		

Chains

Yes	No	Initial	Date	Yes	No	Initial
<input checked="" type="checkbox"/>	<input type="checkbox"/>	VL	5/14	<input type="checkbox"/>	<input checked="" type="checkbox"/>	VL

Set #	Initial	Date
1	VL	5/14
2	VL	5/14

Set #	Initial	Date
1	VL	5/14
2	VL	5/14

Set #	Initial	Date
1	VL	5/14
2	VL	5/14



East Shore Road Semi Annual PMs

January - June 2010

Tank 4B
(NEW)

- Pump Down Tanks

Yes	No	Initial	Date
<input checked="" type="checkbox"/>	<input type="checkbox"/>	VL	5/14

Chain Pins

Yes	No	Initial	Date
<input checked="" type="checkbox"/>	<input type="checkbox"/>	VL	5/14

Yes	No	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	⇒

	North Side	South Side
Amount:	<input type="text"/>	<input type="text"/>
Total Replaced:	<input type="text"/>	

- Grit Present?

Yes	No	Initial
<input checked="" type="checkbox"/>	<input type="checkbox"/>	VL

If Yes...

Little, Moderate or Heavy?	Little	Moderate	Heavy
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- Check for Grit

(check off one box)

- Caulking

Yes	No	Initial
<input type="checkbox"/>	<input checked="" type="checkbox"/>	VL

Condition of Caulking...

Good, Fair or Poor?	Good	Fair	Poor
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

- Caulking Replaced?

(check off one box)

- Weirs

Yes	No	Initial
<input checked="" type="checkbox"/>	<input type="checkbox"/>	VL

- Duration Off Line

# of Hours	Initial
7	VL

- Inspect Weirs

Shoes

Yes	No	Initial	Date
<input checked="" type="checkbox"/>	<input type="checkbox"/>	VL	5/14

- Inspected?

- Carry Shoe

Yes	No	Initial
<input checked="" type="checkbox"/>	<input type="checkbox"/>	VL

- Inspected?

Yes	No	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	→

	North Side	South Side
Amount:	<input type="text"/>	<input type="text"/>
Number Replaced:	<input type="text"/>	

- Replaced?

- Rotated?

Yes	No	Initial
<input type="checkbox"/>	<input checked="" type="checkbox"/>	VL

- Stainless Steel Hardware ?

Yes	No	Initial
<input checked="" type="checkbox"/>	<input type="checkbox"/>	VL

If No...

Yes	No	Initial	Date
<input type="checkbox"/>	<input type="checkbox"/>		

Hardware Replaced?

Chains

Yes	No	Initial	Date
<input checked="" type="checkbox"/>	<input type="checkbox"/>	VL	5/14

- Check Chain Tension

Yes	No	Initial
<input type="checkbox"/>	<input checked="" type="checkbox"/>	VL

- Chains Adjusted?

- Drive Chain

- Flight Chains

- Cross Collector Chains

Set #	Initial	Date
1	VL	5/14
2	VL	5/14

Set #	Initial	Date
1	VL	5/14
2	VL	5/14

Set #	Initial	Date
1	VL	5/14
2	VL	5/14

S.A. East Shore Road - 6 ✓



East Shore Road Semi Annual PMs

January - June 2010

Final Tanks

-Grease Shear Pin Initial Date

Sprockets

(12 SHOTS/OFF)

Tank 1

-Pump Down Tanks Yes No Initial Date

Chain Pins

-Inspected? Yes No Initial Date

-Replaced? Yes No Initial Date

	East Side	West Side	Cross Collector
Amount Replaced:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Total Replaced:	<input type="checkbox"/>		

-Grit Present? Yes No Initial Date

If Yes... Little Moderate Heavy

Little, Moderate or Heavy?

-Caulking Yes No Initial Date

Condition of Caulking... Good Fair Poor

Good, Fair or Poor?

-Weirs Yes No Initial Date

-Duration Off Line # of Hours Initial

-In Hours

Shoes

- Inspected? Yes No Initial Date

-Carry Shoe Yes No Initial Date

- Replaced? Yes No Initial Date

	East Side	West Side	Cross Collector
Amount Replaced:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Total Replaced:	<input type="checkbox"/>		

-Rotated? Yes No Initial Date

-Stainless Steel Hardware? Yes No Initial Date

If No... Hardware Replaced? Yes No Initial

Chains

-Check Chain Tension Yes No Initial Date

-Chains Adjusted? Yes No Initial

-Drive Chain

Set #	Initial	Date
1	<input type="checkbox"/>	<input type="checkbox"/>
2	<input type="checkbox"/>	<input type="checkbox"/>

-Flight Chains

Set #	Initial	Date
1	<input type="checkbox"/>	<input type="checkbox"/>
2	<input type="checkbox"/>	<input type="checkbox"/>

-Cross Collector Chains

Set #	Initial	Date
1	<input type="checkbox"/>	<input type="checkbox"/>
2	<input type="checkbox"/>	<input type="checkbox"/>



East Shore Road Semi Annual PMs

January - June 2010

Tank 2

-Pump Down Tanks

Yes	No	Initial	Date
<input checked="" type="checkbox"/>	<input type="checkbox"/>	VR	6/18

Chain Pins

-Inspected?

Yes	No	Initial	Date
<input checked="" type="checkbox"/>	<input type="checkbox"/>	VR	6/18

-Replaced?

Yes	No	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	→

	East Side	West Side	Cross Collector
Amount Replaced:			
Total Replaced:			

-Grit Present?

Yes	No	Initial
<input checked="" type="checkbox"/>	<input type="checkbox"/>	VR

-Check for Grit

-Caulking

Yes	No	Initial
<input type="checkbox"/>	<input checked="" type="checkbox"/>	VR

-Caulking Replaced?

-Weins

Yes	No	Initial
<input checked="" type="checkbox"/>	<input type="checkbox"/>	VR

-Inspect Weins

If Yes...

Little	Moderate	Heavy
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Little, Moderate or Heavy?

(check off one box)

Condition of Caulking...

Good	Fair	Poor
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Good, Fair or Poor?

(check off one box)

-Duration Off Line

# of Hours	Initial
?	VR

-In Hours

Shoes

- Inspected?

Yes	No	Initial	Date
<input checked="" type="checkbox"/>	<input type="checkbox"/>	VR	6/18

-Carry Shoe

Yes	No	Initial
<input checked="" type="checkbox"/>	<input type="checkbox"/>	VR

-Inspected?

- Replaced?

Yes	No	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	→

	East Side	West Side	Cross Collector
Amount Replaced:			
Total Replaced:			

-Rotated?

Yes	No	Initial
<input type="checkbox"/>	<input checked="" type="checkbox"/>	VR

-Stainless Steel Hardware?

Yes	No	Initial
<input checked="" type="checkbox"/>	<input type="checkbox"/>	VR

→

If No...

Yes	No	Initial
<input type="checkbox"/>	<input type="checkbox"/>	

Hardware Replaced?

Chains

-Check Chain Tension

Yes	No	Initial
<input checked="" type="checkbox"/>	<input type="checkbox"/>	VR

-Chains Adjusted?

Yes	No	Initial
<input type="checkbox"/>	<input checked="" type="checkbox"/>	VR

-Drive Chain

Set #	Initial	Date
1	VR	6/18
2	VR	6/18

-Flight Chains

Set #	Initial	Date
1	VR	6/18
2	VR	6/18

-Cross Collector Chains

Set #	Initial	Date
1	VR	6/18
2	VR	6/18



East Shore Road Semi Annual PMS

January - June 2010

Tank 3A

-Pump Down Tanks

Yes	No	Initial	Date
<input checked="" type="checkbox"/>	<input type="checkbox"/>	VZ	6/14

Chain Pins

Yes	No	Initial	Date
<input checked="" type="checkbox"/>	<input type="checkbox"/>	VZ	6/14

Yes	No	Initial	Date
<input type="checkbox"/>	<input checked="" type="checkbox"/>		

	East Side	West Side	Cross Collector
Amount Replaced:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total Replaced:	<input type="text"/>		

-Grit Present?

Yes	No	Initial
<input checked="" type="checkbox"/>	<input type="checkbox"/>	VZ

-Check for Grit

If Yes...	Little	Moderate	Heavy
Little, Moderate or Heavy?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

-Caulking

Yes	No	Initial
<input type="checkbox"/>	<input checked="" type="checkbox"/>	VZ

-Caulking Replaced?

Condition of Caulking...	Good	Fair	Poor
Good, Fair or Poor?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

-Weirs

Yes	No	Initial
<input checked="" type="checkbox"/>	<input type="checkbox"/>	VZ

-Inspect Weirs

-Duration Off Line	# of Hours	Initial
	8	VZ

Shoes

Yes	No	Initial	Date
<input checked="" type="checkbox"/>	<input type="checkbox"/>	VZ	6/14

-Inspect?

Yes	No	Initial
<input checked="" type="checkbox"/>	<input type="checkbox"/>	VZ

-Inspect?

Yes	No	Initial
<input type="checkbox"/>	<input checked="" type="checkbox"/>	

	East Side	West Side	Cross Collector
Amount Replaced:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total Replaced:	<input type="text"/>		

-Rotated?

Yes	No	Initial
<input type="checkbox"/>	<input checked="" type="checkbox"/>	VZ

-Stainless Steel

Yes	No	Initial
<input checked="" type="checkbox"/>	<input type="checkbox"/>	VZ

Hardware ?

If No...	Yes	No	Initial
Hardware Replaced?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

Chains

Yes	No	Initial
<input checked="" type="checkbox"/>	<input type="checkbox"/>	VZ

-Check Chain Tension

Yes	No	Initial
<input type="checkbox"/>	<input checked="" type="checkbox"/>	VZ

-Chains Adjusted?

-Drive Chain

-Flight Chains

-Cross Collector Chains

Set #	Initial	Date
1	VZ	6/14
2	VZ	6/14

Set #	Initial	Date
1	VZ	6/14
2	VZ	6/14

Set #	Initial	Date
1	VZ	6/14
2	VZ	6/14



East Shore Road Semi Annual PMs

January - June 2010

Tank 3B

-Pump Down Tanks

Yes	No	Initial	Date
<input checked="" type="checkbox"/>	<input type="checkbox"/>	V2	6/14

Chain Pins

Yes	No	Initial	Date
<input checked="" type="checkbox"/>	<input type="checkbox"/>	V2	6/14

-Inspected?

-Replaced?

Yes	No	Initial	Date
<input type="checkbox"/>	<input checked="" type="checkbox"/>		

	East Side	West Side	Cross Collector
Amount Replaced:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total Replaced:	<input type="text"/>		

-Grit Present?

-Check for Grit

Yes	No	Initial
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	V2

If Yes...

Little, Moderate or Heavy?

(check off one box)

Condition of Caulking...

Good, Fair or Poor?

(check off one box)

-Duration Off Line

-in Hours

Little	Moderate	Heavy
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Good	Fair	Poor
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

# of Hours	Initial
8	V2

-Caulking

-Caulking Replaced?

Yes	No	Initial
<input type="checkbox"/>	<input checked="" type="checkbox"/>	

-Weirs

-Inspect Weirs

Yes	No	Initial
<input checked="" type="checkbox"/>	<input type="checkbox"/>	V2

Shoes

Yes	No	Initial	Date
<input checked="" type="checkbox"/>	<input type="checkbox"/>	V2	6/14

- Inspected?

-Carry Shoe

-Inspected?

Yes	No	Initial
<input checked="" type="checkbox"/>	<input type="checkbox"/>	V2

- Replaced?

Yes	No	Initial
<input type="checkbox"/>	<input checked="" type="checkbox"/>	

	East Side	West Side	Cross Collector
Amount Replaced:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total Replaced:	<input type="text"/>		

-Rotated?

Yes	No	Initial
<input type="checkbox"/>	<input checked="" type="checkbox"/>	V2

-Stainless Steel

Hardware ?

Yes	No	Initial
<input checked="" type="checkbox"/>	<input type="checkbox"/>	V2

If No...

Hardware Replaced?

Yes	No	Initial
<input type="checkbox"/>	<input checked="" type="checkbox"/>	V2

Chains

Yes	No	Initial
<input checked="" type="checkbox"/>	<input type="checkbox"/>	V2

-Check Chain Tension

Yes	No	Initial
<input type="checkbox"/>	<input checked="" type="checkbox"/>	V2

-Chains Adjusted?

-Drive Chain

-Flight Chains

-Cross Collector Chains

Set #	Initial	Date
1	V2	6/14
2	V2	6/14

Set #	Initial	Date
1	V2	6/14
2	V2	6/14

Set #	Initial	Date
1	V2	6/14
2	V2	6/14



East Shore Road Semi Annual PMs

January - June 2010

Tank 3C

-Pump Down Tanks

Yes	No	Initial	Date
<input checked="" type="checkbox"/>	<input type="checkbox"/>	V2	6/14

Chain Pins

Yes	No	Initial	Date
<input checked="" type="checkbox"/>	<input type="checkbox"/>	V2	6/14

-Inspected?

-Replaced?

Yes	No	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	→

	East Side	West Side	Cross Collector
Amount Replaced:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total Replaced:	<input type="text"/>		

-Grit Present?

-Check for Grit

Yes	No	Initial
<input checked="" type="checkbox"/>	<input type="checkbox"/>	V2

If Yes...

Little, Moderate or Heavy?

(check off one box)

Condition of Caulking...

Good, Fair or Poor?

(check off one box)

Little	Moderate	Heavy
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Good	Fair	Poor
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

-Caulking

-Caulking Replaced?

Yes	No	Initial
<input type="checkbox"/>	<input checked="" type="checkbox"/>	V2

-Weirs

-Inspect Weirs

Yes	No	Initial
<input checked="" type="checkbox"/>	<input type="checkbox"/>	V2

-Duration Off Line

-In Hours

# of Hours	Initial
8	V2

Shoes

- Inspected?

Yes	No	Initial	Date
<input checked="" type="checkbox"/>	<input type="checkbox"/>	V2	6/14

- Carry Shoe

- Inspected?

Yes	No	Initial
<input checked="" type="checkbox"/>	<input type="checkbox"/>	V2

- Replaced?

Yes	No	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	→

	East Side	West Side	Cross Collector
Amount Replaced:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total Replaced:	<input type="text"/>		

-Rotated?

Yes	No	Initial
<input type="checkbox"/>	<input checked="" type="checkbox"/>	V2

-Stainless Steel Hardware ?

Hardware Replaced?

Yes	No	Initial
<input checked="" type="checkbox"/>	<input type="checkbox"/>	

If No...

Hardware Replaced?

Yes	No	Initial
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Chains

-Check Chain Tension

Yes	No	Initial
<input checked="" type="checkbox"/>	<input type="checkbox"/>	V2

-Chains Adjusted?

Yes	No	Initial
<input type="checkbox"/>	<input checked="" type="checkbox"/>	V2

-Drive Chain

-Flight Chains

-Cross Collector Chains

Set #	Initial	Date
1	V2	6/14
2	V2	6/14

Set #	Initial	Date
1	V2	6/14
2	V2	6/14

Set #	Initial	Date
1	V2	6/14
2	V2	6/14



East Shore Road Semi Annual PMs

2006 Ford F350 Utility Truck
Vehicle Maintenance



January - June 2010

-Seat Belts

Check Lap/Shoulder Belts and seat latches for wear and function
Initial: VZ Date: 2/18

-Spare Tire

Make Sure Spare Tire is in Place, Secure and in Good Condition.
Replace and Note if New Spare Needed.
Initial: VZ Date: 2/18

-Wiper Blades

Replace Wiper Blades with size 20 Driver and 20 Passenger Blades
Check Operation of Wipers after New ones
Replace old.
Initial: VZ Date: 2/18

-Weatherstrips

Check and lubricate door rubber weatherstrips
Initial: VZ Date: 2/18

-Battery Connections

Check and Clean Battery Connections
Initial: VZ Date: 2/18

-Power Steering Fluid

Are P. Steering Fluid Levels Good? If No.. How Much Added..
Check Power Steering Fluid Level
Yes: [X] No: [] → []
Add more if necessary
Initial: VZ Date: 2/18

-Parking Brake

Check Parking Brake for proper operation.
Initial: VZ Date: 2/18

-Hinges, Latches, Locks

Check and lubricate all hinges, latches & locks
Initial: VZ Date: 2/18

-Drain Holes

Check and clean body and door drain holes
Initial: VZ Date: 2/18

-Safety Warning Lamps

Check safety warning lamps for operation (ABS, AirBag, SeatBelt..etc)
Initial: VZ Date: 2/18

-Cooling System

Are Anti Freeze Fluid Levels Good? If No.. How Much Added..
Check Coolant Fluid Level and Strength.
Yes: [X] No: [] → []
Add more if necessary
Initial: VZ Date: 2/18



East Shore Road Semi Annual PMs

January - June 2010

2005 Ford F350 Extended Cab Vehicle Maintenance

-Seat Belts Initial Date
 Check Lap/Shoulder Belts and seat latches for wear and function VZ 6/10

-Spare Tire Initial Date
 Make Sure Spare Tire is in Place, Secure and in Good Condition. VZ 6/22
 Replace and Note if New Spare Needed.

-Wiper Blades Initial Date
 Replace Wiper Blades with size 20 Driver and 20 Passenger Blades. Check Operation of Wipers after New ones. Replace old. VZ 6/10

-Weatherstrips Initial Date
 Check and lubricate door rubber weatherstrips. VZ 6/22

-Battery Connections Initial Date
 Check and Clean Battery Connections. VZ 6/22

-Power Steering Fluid

Are P. Steering Fluid Levels Good? Yes No If No.. How Much Added..

Check Power Steering Fluid Level →

Add more if necessary Initial Date VZ 6/22

-Parking Brake Initial Date
 Check Parking Brake for proper operation. VZ 6/10

-Hinges, Latches, Locks Initial Date
 Check and lubricate all Hinges, latches & locks.

-Drain Holes Initial Date
 Check and clean body and door drain holes. VZ 6/10

-Safety Warning Lamps Initial Date
 Check safety warning lamps for operation (ABS, AirBag, SeatBelt, etc) VZ 6/22

-Cooling System

Are Anti Freeze Fluid Levels Good? Yes No If No.. How Much Added..

Check Coolant Fluid Level and Strength. →

Add more if necessary Initial Date VZ 6/22

① Spare tire in back garage



East Shore Road Semi Annual PMs

January - June 2010

2002 Chevy Silverado 1500 Truck Vehicle Maintenance

-Seat Belts

Initial Date
Check Lap/Shoulder Belts and seat latches for wear and function

-Spare Tire

Initial Date
Make Sure Spare Tire is in Place, Secure and in Good Condition.

Replace and Note if New Spars Needed *SPARE TIRE IN BACK GARAGE*

-Wiper Blades

Initial Date
Replace Wiper Blades with size 22 Driver and 22 Passenger Blades

Check Operation of Wipers after New ones Replace old.

-Weatherstrips

Initial Date
Check and lubricate door rubber weatherstrips

-Steering and Suspension

Initial Date
Inspect front and rear suspension and steering system for damaged, loose or missing parts. Signs of weak or lack

of lubrication. Inspect lines and hook-ups.

-Exhaust System

Initial Date
Inspect complete exhaust system. Look for broken, damaged, missing and out of position parts.

-Fuel System

Initial Date
Inspect fuel system for leaks.

-Engine Cooling

Initial Date
Inspect hoses and replace if damaged. Inspect all pipes, fittings and clamps. Replace if needed to be replaced.

-Throttle System

Initial Date
Inspect throttle system for interference or binding and for damaged and missing parts. Replace parts as needed.

-Power Steering Fluid

Are P. Steering Fluid Levels Good? Yes No If No.. How Much Added..
Check Power Steering Fluid Level →
Add more if necessary
Initial Date

-Parking Brake

Initial Date
Check Parking Brake for proper operation.

-Hinges, Latches, Locks

Initial Date
Check and lubricate all hinges, latches & locks

-Battery Connections

Initial Date
Check and Clean Battery Connections

-Safety Warning Lamps

Initial Date
Check safety warning lamps for operation (ABS, AirBag, SeatBelt, Engine Air Cleaner Filter Restriction Indicator)

-Cooling System

Are Anti Freeze Fluid Levels Good? Yes No If No.. How Much Added..
Check Coolant Fluid Level and Strength. →
Add more if necessary Add DEX-CDDL mixture
If necessary. Initial Date

-Automatic Transmission Fluid

Are Anti Freeze Fluid Levels Good? Yes No If No.. How Much Added..
Check Transmission Fluid Level and Strength. →
Add more if necessary
Initial Date

-Transfer Case and Front Axle

Initial Date
Check front axle and transfer case adding lubricant when/if necessary. Constant fluid loss is early sign of service needed.

-Brake System

Initial Date
Inspect the complete system. Get brakes checked if braking is loose or altered than usual.