**DECK EQUIPMENT PLANNED MAINTENANCE SYSTEM**

**PLANNED MAINTENANCE MONTHLY REPORT**

M.V. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ REPORT NUMBER \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (consists of year & month e.g. 9301 for Jan. 93)

V = Items have been maintained and found in good condition. X = Items have been maintained but some deficiencies found.

Enter V or X as appropriate to indicate Deck Equipment maintenance completed as per Planned Maintenance Record Chart.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Week 1 |  |  | Week 2 |  |  | Week 3 |  |  | Week 4 |  |  | Week 5 |  |  | Month |  |  | Quarter |  |  | Half Year |  |  | Annual |  |

All items identified for maintenance this month in the weekly/monthly/quarterly/half yearly/annual\* Deck Equipment Planned Maintenance Record Chart have been maintained and found in satisfactory working condition except for the following items : (\* delete as applicable)

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| --- | --- | --- | --- | --- | --- |
| CODE | ITEM | DETAILS OF DEFICIENCY FOUND DURING THIS MONTH | ACTION TAKEN | DATE CORRECTED | INITIAL  / RANK |
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**Note 1:** Requisitions required to correct the above deficiencies are to be attached to this form.

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Staff Captain Date

**DECK EQUIIPMENT PLANNED MAINTENANCE SYSTEM**

**PLANNED MAINTENANCE MONTHLY REPORT**

M.V. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ REPORT NUMBER \_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- | --- | --- | --- | --- | --- |
| CODE | ITEM | DETAILS OF DEFICIENCY OUTSTANDING AT END OF LAST MONTH | ACTION TAKEN | DATE CORRECTED | INITIAL  / RANK |
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**Note 2:** This form to be resubmitted as outstanding items are corrected.

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Staff Captain Date