

CELL NAME

TRELLEBORG

MO ID:

OEE FORM

Overall Equipment Effectiveness

Please complete these forms using a **BLACK MARKER AND REMOVE** ERRORS WITH A WHITE/SILVER MARKER

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SFALL

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MPLE: 6 AM – 7AM
MO ID: 1
NUMBER OF LIFTS: 3
MAJOR DOWNTIME:
ENGINEERING ISSUES **EXAMPLE:**

MO ID NUMBER OF LIFTS DOWNTIME CODE O (1) (4) (4) (4) (5) (5) (5) (5) (6) (6) (6) (6) (7)
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Month Year

Day

Sep Aug

Oct

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Downtime Codes	Planned	2 Break				

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DOWNTIME CODE

LIFT COUNTER

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15 16

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