

Conveyor System Preventive Service Schedule

Conveyor ID/Name

Location

Scheduled Date

Technician

Service Checklist

No.	Service Task	Frequency	Status	Remarks
1	Belt inspection	e.g. Monthly	<input type="checkbox"/>	<input type="text"/>
2	Roller check & lubrication	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>
3	Motor visual inspection	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>
4	Check and tighten fasteners	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>
5	Clean sensors and controls	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>

General Remarks

Technician Signature

Supervisor Signature
