Monthly Electrical Maintenance Report									
Format No. Rev. No. Rev. Date.									
Request No.		Request Date Requ		ted by Req. Department		Received by		Work Order No. & Date	
System Failure Registered							System ID & Name		
Maint	enance	Checklist							
Sr. No.		Description				Status		Comment / Suggestion	
Down grad									
<u>Remark</u>	<u>KS</u>								
Installed / Repaired Spare parts			Required	Actions					
Checked by: D		Date:							
Reviewed by:		Date:							