

Plan Maintenance Chart

Check off task and enter date performed:

	6 months	1 year	18 months	2 years
Review plan and quiz	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Date</i>	_____	_____	_____	_____
Hold fire and emergency evacuation drills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Date</i>	_____	_____	_____	_____
Replace stored food and water	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Date</i>	_____	_____	_____	_____
Check fire extinguishers until recharge	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Date</i>	_____	_____	_____	_____