

EDGE PM RECORDS

CUSTOMER INFORMATION

CUSTOMER		EMAIL	
ADDRESS			PHONE
CITY	STATE	ZIP	CONTACT

MACHINE INFORMATION

MODEL #:	SERIAL #:
WORK ORDER#:	HOUR METER:

DECK CONDITION

EDGE PAD GRIP FACE	GOOD	WORN	NEEDS REPLACEMENT
SPACER PAD	GOOD	WORN	NEEDS REPLACEMENT

CHECK OPERATION AND CONDITION OF:

	IN SPEC	REPAIR	PROBLEM
TRIGGER KEY SWITCH (OPTIONAL)			
SOLUTION ON/OFF LEVER (OPTIONAL)			
SCRUBDECK MOTOR			
INSPECT AC CORD (REPLACE IF DAMAGED)			
INSPECT EDGE OF ALUMINUM DECK (REPORT IF DAMAGED)			
VACUUM MOTOR PERFORMANCE (OPTIONAL)			

VISUALLY INSPECT

	IN SPEC	REPAIR	PROBLEM
VACUUM HOSES (OPTIONAL)			
SOLUTION HOSES (OPTIONAL)			
DUST SKIRTS (OPTIONAL)			
MACHINE WHEELS			

MEASURE GAP AT 4 CORNERS

	FRONT RIGHT	FRONT LEFT	BACK RIGHT	BACK LEFT
BETWEEN ALUMINUM AND STEEL DECKS				

VISUALLY INSPECT

	IN SPEC	REPAIR	PROBLEM
VACUUM HOSES (OPTIONAL)			
SOLUTION HOSES (OPTIONAL)			
DUST SKIRTS (OPTIONAL)			
MACHINE WHEELS			

COMMENTS

SERVICING DISTRIBUTOR: _____

TECHNICIAN'S NAME: _____ DATE: _____ SIGNATURE: _____

CUSTOMER'S NAME: _____ DATE: _____ SIGNATURE: _____