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## Perchloroethylene Dry Cleaning Calendar

# 2024

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602-506-5102

301 W. Jefferson St., Suite 410  
Phoenix, AZ 85003

[Maricopa.gov/AQ](https://www.maricopa.gov/AQ)



## Recordkeeping Requirements

- Keep all perchloroethylene (PCE) purchase receipts on site for five years.
- Enter the amount of PCE purchased each month on the monthly pages and enter the amount into the 24-Month PCE Purchases table below to confirm the facility is below the 1,100 gallon (gal) limit.
- Each week check for perceptible leaks while the dry cleaning machines are in operation. Enter the date and whether a leak is found on the monthly pages. Make sure to use a halogenated hydrocarbon detector or PCE gas analyzer at least once a month for the perceptible leak checks.
- Repair all leaks within 24 hours of detection. If parts must be ordered, order parts within two working days and repair within five working days upon receipt. Track all dates of repairs in the monthly pages and keep receipts.
- Each week monitor and record the temperature or pressure of the refrigerated condenser. Enter the date and the temperature or pressure reading on the monthly pages.
- Dry cleaning machines, refrigerated condensers, probes and sensors, and separator water treatment units must be maintained according to the manufacturer's operating manual. Keep the manual and maintenance records onsite.
- If any operating parameters are observed to be outside the manufacturers' limits, adjustments or repairs must be made. If new parts are needed, order within two working days and repair within five working days upon receipt.

## Permit Requirements

- Do not operate a transfer machine.
- Do not operate dry cleaning equipment with leaks.
- Repair all leaks within 24 hours of detection. If parts must be ordered, order parts within two working days and repair within five working days upon receipt.
- Close the door of each dry cleaning machine immediately after transferring clothing to or from the machine. The door must remain closed at all other times.
- Filters must be drained in their housing, or another sealed container for at least 24 hours before disposal.
- Store all PCE and PCE waste in closed solvent tanks or solvent containers with no leaks.
- Dry cleaning machines installed after December 21, 2005, must route the air-PCE gas vapor stream through a refrigerated condenser, and pass the stream through a non-vented carbon absorber or equivalent control device.

## Separator Water Treatment Requirements

- Evaporation of PCE contaminated water is not allowed.
- Used absorption media must be kept in closed containers.
- The separator water treatment unit must be labeled with: "Hazardous Waste, Perchloroethylene Separator Wastewater".
- The separator water treatment unit must be leak free with a waterproof cover that keeps vapors from escaping.
- The separator water treatment unit and air dispersion unit must be closed unless actively adding wastewater.
- Keep records of the dates the carbon filters are changed and the amount of PCE wastewater treated since the last filter change. Enter the date and amount of treated PCE wastewater on the monthly pages.
- Maintain and operate the separator water treatment unit per the manufacturer's operating manual. Keep the manual and maintenance records onsite.

## 24-Month PCE Purchases

Limit: 1,100 gal per 12-Month Period

<p>Enter the amount of PCE purchased from your 2023 calendar.</p> <p>If no PCE was purchased enter a '0' in the space.</p>	January 2023		<p>Each month enter the amount of PCE purchased on the monthly pages and record here.</p> <p>If no PCE was purchased enter a '0' in the space.</p>	January 2024	
	February 2023			February 2024	
	March 2023			March 2024	
	April 2023			April 2024	
	May 2023			May 2024	
	June 2023			June 2024	
	July 2023			July 2024	
	August 2023			August 2024	
	September 2023			September 2024	
	October 2023			October 2024	
	November 2023			November 2024	
	December 2023			December 2024	

## Maricopa County Air Quality Business Assistance Unit



MCAQD  
Business Assistance Unit  
[AQBusinessAssistance@maricopa.gov](mailto:AQBusinessAssistance@maricopa.gov)  
602-506-5102

The Maricopa County Air Quality Department (MCAQD) Business Assistance Unit provides information and technical assistance to business owners related to air quality rules and regulations. They offer courtesy site visits, on-site training, rule interpretation and education, and a formal case review process for violations. For more information, visit: [Maricopa.gov/1793](http://Maricopa.gov/1793).

## Hazardous Waste Information



ADEQ  
Hazardous Waste Program  
[HazWastePermits@azdeq.gov](mailto:HazWastePermits@azdeq.gov)  
602-771-4728  
602-771-4120

Any PCE-related waste such as powder residues, still-bottom residues, spent cartridges, button/lint trap waste, and separator water must be managed as hazardous waste. Improper handling of hazardous waste is against the law and can result in violations, fines, and costly remediation. Dispose of hazardous waste per statutes. Contact the Arizona Department of Environmental Quality (ADEQ) for questions regarding hazardous waste. For more information, visit: [Azdeq.gov/HazWaste](http://Azdeq.gov/HazWaste).

### Example

Mon	Tues	Wed	Thurs	Fri	Sat	Sun
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

#### Monthly Amount of PCE Purchased

Monthly Total (gal):

If no PCE is purchased this month enter '0'.

**REMEMBER TO RECORD ALL PCE PURCHASES ON PAGE 1.**

#### Perceptible Leak Repairs

Repair leaks within 24 hours. Order parts within two working days and repair within five working upon receipt.

Date Parts Ordered:

Date Parts Received:

Date of Repairs:

#### Separator Water Treatment: Carbon Filter Changes

Enter the amount of PCE water treated since the last carbon filter change.

Date of Filter Change:

Amount of Treated Water (gal):

#### Operating and Maintenance Requirements

Dry cleaning machines, refrigerated condenser, probes and sensors, and the separator water treatment unit must be maintained according to the manufacturer. Keep the manual and maintenance records onsite. If any operating parameters are observed to be outside the manufacturers' limits, adjustments or repairs must be made. If new parts are needed, order within two working days and repair within five working days upon receipt.

### Weekly Perceptible Leak Check

Check while the dry cleaning unit is in operation.

Remember at least once this month you must use a halogenated hydrocarbon detector or PCE gas analyzer for your weekly perceptible leak check.

Date of Inspection:

Was a leak detected? Check Yes or No:

Hoses, Fittings, and Couplings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Pipe Connections and Valves	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Door Gaskets and Seatings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Filter Gaskets and Seatings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Pumps	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Solvent Tanks and Containers	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Water Separators	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Muck Cookers	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Stills	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Exhaust Damper	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Diverter Valves	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
All Filter Housings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

Was a detector or analyzer used for this reading? Remember at least once this month you must use a detector or analyzer.

Check Yes or No:

Yes  No

Yes  No

Yes  No

Yes  No

Yes  No

**ONLY COMPLETE THE TEMPERATURE OR PRESSURE CHECK, NOT BOTH.**

#### Weekly Refrigerated Condenser Temperature Checks

At the end of cool-down or drying cycle check the temperature of the air exiting the refrigerated condenser to confirm it is equal to or less than 45°F (7.2°C).

Date of Reading:

Temperature Reading:

#### Weekly Refrigerated Condenser High and Low Pressure Checks

During the drying phase check the high and low pressure to confirm it is within the range specified by the manufacturer.

Date of Reading:

High Pressure Reading:

Low Pressure Reading:

## January 2024

Mon	Tues	Wed	Thurs	Fri	Sat	Sun
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

Monthly Amount of PCE Purchased	
Monthly Total (gal):	
If no PCE is purchased this month enter '0'.	

REMEMBER TO RECORD ALL PCE PURCHASES ON PAGE 1.

Perceptible Leak Repairs	
Repair leaks within 24 hours. Order parts within two working days and repair within five working upon receipt.	
Date Parts Ordered:	
Date Parts Received:	
Date of Repairs:	

Separator Water Treatment: Carbon Filter Changes	
Enter the amount of PCE water treated since the last carbon filter change.	
Date of Filter Change:	
Amount of Treated Water (gal):	

Operating and Maintenance Requirements	
Dry cleaning machines, refrigerated condenser, probes and sensors, and the separator water treatment unit must be maintained according to the manufacturer. Keep the manual and maintenance records onsite. If any operating parameters are observed to be outside the manufacturers' limits, adjustments or repairs must be made. If new parts are needed, order within two working days and repair within five working days upon receipt.	

Weekly Perceptible Leak Check					
Check while the dry cleaning unit is in operation.					
Remember at least once this month you must use a halogenated hydrocarbon detector or PCE gas analyzer for your weekly perceptible leak check.					
Date of Inspection:					
Was a leak detected? Check Yes or No:					
Hoses, Fittings, and Couplings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Pipe Connections and Valves	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Door Gaskets and Seatings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Filter Gaskets and Seatings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Pumps	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Solvent Tanks and Containers	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Water Separators	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Muck Cookers	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Stills	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Exhaust Damper	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Diverter Valves	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
All Filter Housings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Was a detector or analyzer used for this reading? Remember at least once this month you must use a detector or analyzer.					
Check Yes or No:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

ONLY COMPLETE THE TEMPERATURE OR PRESSURE CHECK, NOT BOTH.

Weekly Refrigerated Condenser Temperature Checks				
At the end of cool-down or drying cycle check the temperature of the air exiting the refrigerated condenser to confirm it is equal to or less than 45°F ( 7.2°C ).				
Date of Reading:				
Temperature Reading:				

Weekly Refrigerated Condenser High and Low Pressure Checks				
During the drying phase check the high and low pressure to confirm it is within the range specified by the manufacturer.				
Date of Reading:				
High Pressure Reading:				
Low Pressure Reading:				

## February 2024

Mon	Tues	Wed	Thurs	Fri	Sat	Sun
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29			

Monthly Amount of PCE Purchased	
Monthly Total (gal):	
If no PCE is purchased this month enter '0'.	

REMEMBER TO RECORD ALL PCE PURCHASES ON PAGE 1.

Perceptible Leak Repairs	
Repair leaks within 24 hours. Order parts within two working days and repair within five working upon receipt.	
Date Parts Ordered:	
Date Parts Received:	
Date of Repairs:	

Separator Water Treatment: Carbon Filter Changes	
Enter the amount of PCE water treated since the last carbon filter change.	
Date of Filter Change:	
Amount of Treated Water (gal):	

Operating and Maintenance Requirements	
Dry cleaning machines, refrigerated condenser, probes and sensors, and the separator water treatment unit must be maintained according to the manufacturer. Keep the manual and maintenance records onsite. If any operating parameters are observed to be outside the manufacturers' limits, adjustments or repairs must be made. If new parts are needed, order within two working days and repair within five working days upon receipt.	

Weekly Perceptible Leak Check					
Check while the dry cleaning unit is in operation.					
Remember at least once this month you must use a halogenated hydrocarbon detector or PCE gas analyzer for your weekly perceptible leak check.					
Date of Inspection:					
Was a leak detected? Check Yes or No:					
Hoses, Fittings, and Couplings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Pipe Connections and Valves	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Door Gaskets and Seatings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Filter Gaskets and Seatings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Pumps	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Solvent Tanks and Containers	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Water Separators	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Muck Cookers	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Stills	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Exhaust Damper	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Diverter Valves	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
All Filter Housings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Was a detector or analyzer used for this reading? Remember at least once this month you must use a detector or analyzer.					
Check Yes or No:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

ONLY COMPLETE THE TEMPERATURE OR PRESSURE CHECK, NOT BOTH.

Weekly Refrigerated Condenser Temperature Checks				
At the end of cool-down or drying cycle check the temperature of the air exiting the refrigerated condenser to confirm it is equal to or less than 45°F ( 7.2°C ).				
Date of Reading:				
Temperature Reading:				

Weekly Refrigerated Condenser High and Low Pressure Checks				
During the drying phase check the high and low pressure to confirm it is within the range specified by the manufacturer.				
Date of Reading:				
High Pressure Reading:				
Low Pressure Reading:				

**March 2024**

Mon	Tues	Wed	Thurs	Fri	Sat	Sun
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

Monthly Amount of PCE Purchased	
Monthly Total (gal):	
If no PCE is purchased this month enter '0'.	

**REMEMBER TO RECORD ALL PCE PURCHASES ON PAGE 1.**

Perceptible Leak Repairs	
Repair leaks within 24 hours. Order parts within two working days and repair within five working upon receipt.	
Date Parts Ordered:	
Date Parts Received:	
Date of Repairs:	

Separator Water Treatment: Carbon Filter Changes	
Enter the amount of PCE water treated since the last carbon filter change.	
Date of Filter Change:	
Amount of Treated Water (gal):	

Operating and Maintenance Requirements	
Dry cleaning machines, refrigerated condenser, probes and sensors, and the separator water treatment unit must be maintained according to the manufacturer. Keep the manual and maintenance records onsite. If any operating parameters are observed to be outside the manufacturers' limits, adjustments or repairs must be made. If new parts are needed, order within two working days and repair within five working days upon receipt.	

Weekly Perceptible Leak Check					
Check while the dry cleaning unit is in operation.					
Remember at least once this month you must use a halogenated hydrocarbon detector or PCE gas analyzer for your weekly perceptible leak check.					
Date of Inspection:					
Was a leak detected? Check Yes or No:					
Hoses, Fittings, and Couplings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Pipe Connections and Valves	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Door Gaskets and Seatings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Filter Gaskets and Seatings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Pumps	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Solvent Tanks and Containers	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Water Separators	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Muck Cookers	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Stills	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Exhaust Damper	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Diverter Valves	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
All Filter Housings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Was a detector or analyzer used for this reading? Remember at least once this month you must use a detector or analyzer.					
Check Yes or No:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

**ONLY COMPLETE THE TEMPERATURE OR PRESSURE CHECK, NOT BOTH.**

Weekly Refrigerated Condenser Temperature Checks				
At the end of cool-down or drying cycle check the temperature of the air exiting the refrigerated condenser to confirm it is equal to or less than 45°F ( 7.2°C ).				
Date of Reading:				
Temperature Reading:				

Weekly Refrigerated Condenser High and Low Pressure Checks				
During the drying phase check the high and low pressure to confirm it is within the range specified by the manufacturer.				
Date of Reading:				
High Pressure Reading:				
Low Pressure Reading:				

## April 2024

Mon	Tues	Wed	Thurs	Fri	Sat	Sun
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

Monthly Amount of PCE Purchased	
Monthly Total (gal):	
If no PCE is purchased this month enter '0'.	

REMEMBER TO RECORD ALL PCE PURCHASES ON PAGE 1.

Perceptible Leak Repairs	
Repair leaks within 24 hours. Order parts within two working days and repair within five working upon receipt.	
Date Parts Ordered:	
Date Parts Received:	
Date of Repairs:	

Separator Water Treatment: Carbon Filter Changes	
Enter the amount of PCE water treated since the last carbon filter change.	
Date of Filter Change:	
Amount of Treated Water (gal):	

Operating and Maintenance Requirements	
Dry cleaning machines, refrigerated condenser, probes and sensors, and the separator water treatment unit must be maintained according to the manufacturer. Keep the manual and maintenance records onsite. If any operating parameters are observed to be outside the manufacturers' limits, adjustments or repairs must be made. If new parts are needed, order within two working days and repair within five working days upon receipt.	

Weekly Perceptible Leak Check					
Check while the dry cleaning unit is in operation. Remember at least once this month you must use a halogenated hydrocarbon detector or PCE gas analyzer for your weekly perceptible leak check.					
Date of Inspection:					
Was a leak detected? Check Yes or No:					
Hoses, Fittings, and Couplings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Pipe Connections and Valves	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Door Gaskets and Seatings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Filter Gaskets and Seatings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Pumps	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Solvent Tanks and Containers	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Water Separators	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Muck Cookers	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Stills	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Exhaust Damper	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Diverter Valves	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
All Filter Housings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Was a detector or analyzer used for this reading? Remember at least once this month you must use a detector or analyzer.					
Check Yes or No:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

ONLY COMPLETE THE TEMPERATURE OR PRESSURE CHECK, NOT BOTH.

Weekly Refrigerated Condenser Temperature Checks				
At the end of cool-down or drying cycle check the temperature of the air exiting the refrigerated condenser to confirm it is equal to or less than 45°F ( 7.2°C ).				
Date of Reading:				
Temperature Reading:				

Weekly Refrigerated Condenser High and Low Pressure Checks				
During the drying phase check the high and low pressure to confirm it is within the range specified by the manufacturer.				
Date of Reading:				
High Pressure Reading:				
Low Pressure Reading:				

**May 2024**

Mon	Tues	Wed	Thurs	Fri	Sat	Sun
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

Monthly Amount of PCE Purchased	
Monthly Total (gal):	
If no PCE is purchased this month enter '0'.	

**REMEMBER TO RECORD ALL PCE PURCHASES ON PAGE 1.**

Perceptible Leak Repairs	
Repair leaks within 24 hours. Order parts within two working days and repair within five working upon receipt.	
Date Parts Ordered:	
Date Parts Received:	
Date of Repairs:	

Separator Water Treatment: Carbon Filter Changes	
Enter the amount of PCE water treated since the last carbon filter change.	
Date of Filter Change:	
Amount of Treated Water (gal):	

Operating and Maintenance Requirements	
Dry cleaning machines, refrigerated condenser, probes and sensors, and the separator water treatment unit must be maintained according to the manufacturer. Keep the manual and maintenance records onsite. If any operating parameters are observed to be outside the manufacturers' limits, adjustments or repairs must be made. If new parts are needed, order within two working days and repair within five working days upon receipt.	

Weekly Perceptible Leak Check					
Check while the dry cleaning unit is in operation.					
Remember at least once this month you must use a halogenated hydrocarbon detector or PCE gas analyzer for your weekly perceptible leak check.					
Date of Inspection:					
Was a leak detected? Check Yes or No:					
Hoses, Fittings, and Couplings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Pipe Connections and Valves	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Door Gaskets and Seatings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Filter Gaskets and Seatings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Pumps	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Solvent Tanks and Containers	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Water Separators	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Muck Cookers	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Stills	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Exhaust Damper	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Diverter Valves	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
All Filter Housings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Was a detector or analyzer used for this reading? Remember at least once this month you must use a detector or analyzer.					
Check Yes or No:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

**ONLY COMPLETE THE TEMPERATURE OR PRESSURE CHECK, NOT BOTH.**

Weekly Refrigerated Condenser Temperature Checks				
At the end of cool-down or drying cycle check the temperature of the air exiting the refrigerated condenser to confirm it is equal to or less than 45°F ( 7.2°C ).				
Date of Reading:				
Temperature Reading:				

Weekly Refrigerated Condenser High and Low Pressure Checks				
During the drying phase check the high and low pressure to confirm it is within the range specified by the manufacturer.				
Date of Reading:				
High Pressure Reading:				
Low Pressure Reading:				



**June 2024**

Mon	Tues	Wed	Thurs	Fri	Sat	Sun
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

Monthly Amount of PCE Purchased	
Monthly Total (gal):	
If no PCE is purchased this month enter '0'.	

**REMEMBER TO RECORD ALL PCE PURCHASES ON PAGE 1.**

Perceptible Leak Repairs	
Repair leaks within 24 hours. Order parts within two working days and repair within five working upon receipt.	
Date Parts Ordered:	
Date Parts Received:	
Date of Repairs:	

Separator Water Treatment: Carbon Filter Changes	
Enter the amount of PCE water treated since the last carbon filter change.	
Date of Filter Change:	
Amount of Treated Water (gal):	

Operating and Maintenance Requirements	
Dry cleaning machines, refrigerated condenser, probes and sensors, and the separator water treatment unit must be maintained according to the manufacturer. Keep the manual and maintenance records onsite. If any operating parameters are observed to be outside the manufacturers' limits, adjustments or repairs must be made. If new parts are needed, order within two working days and repair within five working days upon receipt.	

Weekly Perceptible Leak Check					
Check while the dry cleaning unit is in operation. Remember at least once this month you must use a halogenated hydrocarbon detector or PCE gas analyzer for your weekly perceptible leak check.					
Date of Inspection:					
Was a leak detected? Check Yes or No:					
Hoses, Fittings, and Couplings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Pipe Connections and Valves	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Door Gaskets and Seatings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Filter Gaskets and Seatings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Pumps	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Solvent Tanks and Containers	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Water Separators	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Muck Cookers	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Stills	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Exhaust Damper	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Diverter Valves	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
All Filter Housings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Was a detector or analyzer used for this reading? Remember at least once this month you must use a detector or analyzer.					
Check Yes or No:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

**ONLY COMPLETE THE TEMPERATURE OR PRESSURE CHECK, NOT BOTH.**

Weekly Refrigerated Condenser Temperature Checks				
At the end of cool-down or drying cycle check the temperature of the air exiting the refrigerated condenser to confirm it is equal to or less than 45°F ( 7.2°C ).				
Date of Reading:				
Temperature Reading:				

Weekly Refrigerated Condenser High and Low Pressure Checks				
During the drying phase check the high and low pressure to confirm it is within the range specified by the manufacturer.				
Date of Reading:				
High Pressure Reading:				
Low Pressure Reading:				

## July 2024

Mon	Tues	Wed	Thurs	Fri	Sat	Sun
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

Monthly Amount of PCE Purchased	
Monthly Total (gal):	
If no PCE is purchased this month enter '0'.	

REMEMBER TO RECORD ALL PCE PURCHASES ON PAGE 1.

Perceptible Leak Repairs	
Repair leaks within 24 hours. Order parts within two working days and repair within five working upon receipt.	
Date Parts Ordered:	
Date Parts Received:	
Date of Repairs:	

Separator Water Treatment: Carbon Filter Changes	
Enter the amount of PCE water treated since the last carbon filter change.	
Date of Filter Change:	
Amount of Treated Water (gal):	

Operating and Maintenance Requirements	
Dry cleaning machines, refrigerated condenser, probes and sensors, and the separator water treatment unit must be maintained according to the manufacturer. Keep the manual and maintenance records onsite. If any operating parameters are observed to be outside the manufacturers' limits, adjustments or repairs must be made. If new parts are needed, order within two working days and repair within five working days upon receipt.	

Weekly Perceptible Leak Check					
Check while the dry cleaning unit is in operation.					
Remember at least once this month you must use a halogenated hydrocarbon detector or PCE gas analyzer for your weekly perceptible leak check.					
Date of Inspection:					
Was a leak detected? Check Yes or No:					
Hoses, Fittings, and Couplings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Pipe Connections and Valves	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Door Gaskets and Seatings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Filter Gaskets and Seatings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Pumps	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Solvent Tanks and Containers	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Water Separators	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Muck Cookers	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Stills	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Exhaust Damper	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Diverter Valves	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
All Filter Housings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Was a detector or analyzer used for this reading? Remember at least once this month you must use a detector or analyzer.					
Check Yes or No:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

ONLY COMPLETE THE TEMPERATURE OR PRESSURE CHECK, NOT BOTH.

Weekly Refrigerated Condenser Temperature Checks				
At the end of cool-down or drying cycle check the temperature of the air exiting the refrigerated condenser to confirm it is equal to or less than 45°F ( 7.2°C ).				
Date of Reading:				
Temperature Reading:				

Weekly Refrigerated Condenser High and Low Pressure Checks				
During the drying phase check the high and low pressure to confirm it is within the range specified by the manufacturer.				
Date of Reading:				
High Pressure Reading:				
Low Pressure Reading:				

## August 2024

Mon	Tues	Wed	Thurs	Fri	Sat	Sun
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

Monthly Amount of PCE Purchased	
Monthly Total (gal):	
If no PCE is purchased this month enter '0'.	

REMEMBER TO RECORD ALL PCE PURCHASES ON PAGE 1.

Perceptible Leak Repairs	
Repair leaks within 24 hours. Order parts within two working days and repair within five working upon receipt.	
Date Parts Ordered:	
Date Parts Received:	
Date of Repairs:	

Separator Water Treatment: Carbon Filter Changes	
Enter the amount of PCE water treated since the last carbon filter change.	
Date of Filter Change:	
Amount of Treated Water (gal):	

Operating and Maintenance Requirements	
Dry cleaning machines, refrigerated condenser, probes and sensors, and the separator water treatment unit must be maintained according to the manufacturer. Keep the manual and maintenance records onsite. If any operating parameters are observed to be outside the manufacturers' limits, adjustments or repairs must be made. If new parts are needed, order within two working days and repair within five working days upon receipt.	

Weekly Perceptible Leak Check					
Check while the dry cleaning unit is in operation.					
Remember at least once this month you must use a halogenated hydrocarbon detector or PCE gas analyzer for your weekly perceptible leak check.					
Date of Inspection:					
Was a leak detected? Check Yes or No:					
Hoses, Fittings, and Couplings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Pipe Connections and Valves	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Door Gaskets and Seatings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Filter Gaskets and Seatings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Pumps	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Solvent Tanks and Containers	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Water Separators	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Muck Cookers	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Stills	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Exhaust Damper	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Diverter Valves	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
All Filter Housings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Was a detector or analyzer used for this reading? Remember at least once this month you must use a detector or analyzer.					
Check Yes or No:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

ONLY COMPLETE THE TEMPERATURE OR PRESSURE CHECK, NOT BOTH.

Weekly Refrigerated Condenser Temperature Checks				
At the end of cool-down or drying cycle check the temperature of the air exiting the refrigerated condenser to confirm it is equal to or less than 45°F ( 7.2°C ).				
Date of Reading:				
Temperature Reading:				

Weekly Refrigerated Condenser High and Low Pressure Checks				
During the drying phase check the high and low pressure to confirm it is within the range specified by the manufacturer.				
Date of Reading:				
High Pressure Reading:				
Low Pressure Reading:				

## September 2024

Mon	Tues	Wed	Thurs	Fri	Sat	Sun
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30						

Monthly Amount of PCE Purchased	
Monthly Total (gal):	
If no PCE is purchased this month enter '0'.	

REMEMBER TO RECORD ALL PCE PURCHASES ON PAGE 1.

Perceptible Leak Repairs	
Repair leaks within 24 hours. Order parts within two working days and repair within five working upon receipt.	
Date Parts Ordered:	
Date Parts Received:	
Date of Repairs:	

Separator Water Treatment: Carbon Filter Changes	
Enter the amount of PCE water treated since the last carbon filter change.	
Date of Filter Change:	
Amount of Treated Water (gal):	

Operating and Maintenance Requirements
Dry cleaning machines, refrigerated condenser, probes and sensors, and the separator water treatment unit must be maintained according to the manufacturer. Keep the manual and maintenance records onsite. If any operating parameters are observed to be outside the manufacturers' limits, adjustments or repairs must be made. If new parts are needed, order within two working days and repair within five working days upon receipt.

Weekly Perceptible Leak Check					
Check while the dry cleaning unit is in operation.					
Remember at least once this month you must use a halogenated hydrocarbon detector or PCE gas analyzer for your weekly perceptible leak check.					
Date of Inspection:					
Was a leak detected? Check Yes or No:					
Hoses, Fittings, and Couplings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Pipe Connections and Valves	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Door Gaskets and Seatings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Filter Gaskets and Seatings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Pumps	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Solvent Tanks and Containers	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Water Separators	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Muck Cookers	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Stills	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Exhaust Damper	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Diverter Valves	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
All Filter Housings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Was a detector or analyzer used for this reading? Remember at least once this month you must use a detector or analyzer.					
Check Yes or No:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

ONLY COMPLETE THE TEMPERATURE OR PRESSURE CHECK, NOT BOTH.

Weekly Refrigerated Condenser Temperature Checks				
At the end of cool-down or drying cycle check the temperature of the air exiting the refrigerated condenser to confirm it is equal to or less than 45°F ( 7.2°C ).				
Date of Reading:				
Temperature Reading:				

Weekly Refrigerated Condenser High and Low Pressure Checks				
During the drying phase check the high and low pressure to confirm it is within the range specified by the manufacturer.				
Date of Reading:				
High Pressure Reading:				
Low Pressure Reading:				

## October 2024

Mon	Tues	Wed	Thurs	Fri	Sat	Sun
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

Monthly Amount of PCE Purchased	
Monthly Total (gal):	
If no PCE is purchased this month enter '0'.	

REMEMBER TO RECORD ALL PCE PURCHASES ON PAGE 1.

Perceptible Leak Repairs	
Repair leaks within 24 hours. Order parts within two working days and repair within five working upon receipt.	
Date Parts Ordered:	
Date Parts Received:	
Date of Repairs:	

Separator Water Treatment: Carbon Filter Changes	
Enter the amount of PCE water treated since the last carbon filter change.	
Date of Filter Change:	
Amount of Treated Water (gal):	

Operating and Maintenance Requirements	
Dry cleaning machines, refrigerated condenser, probes and sensors, and the separator water treatment unit must be maintained according to the manufacturer. Keep the manual and maintenance records onsite. If any operating parameters are observed to be outside the manufacturers' limits, adjustments or repairs must be made. If new parts are needed, order within two working days and repair within five working days upon receipt.	

Weekly Perceptible Leak Check						
Check while the dry cleaning unit is in operation. Remember at least once this month you must use a halogenated hydrocarbon detector or PCE gas analyzer for your weekly perceptible leak check.						
Date of Inspection:						
Was a leak detected? Check Yes or No:						
Hoses, Fittings, and Couplings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Pipe Connections and Valves	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Door Gaskets and Seatings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Filter Gaskets and Seatings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Pumps	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Solvent Tanks and Containers	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Water Separators	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Muck Cookers	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Stills	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Exhaust Damper	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Diverter Valves	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
All Filter Housings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Was a detector or analyzer used for this reading? Remember at least once this month you must use a detector or analyzer.						
Check Yes or No:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

ONLY COMPLETE THE TEMPERATURE OR PRESSURE CHECK, NOT BOTH.

Weekly Refrigerated Condenser Temperature Checks				
At the end of cool-down or drying cycle check the temperature of the air exiting the refrigerated condenser to confirm it is equal to or less than 45°F ( 7.2°C ).				
Date of Reading:				
Temperature Reading:				

Weekly Refrigerated Condenser High and Low Pressure Checks				
During the drying phase check the high and low pressure to confirm it is within the range specified by the manufacturer.				
Date of Reading:				
High Pressure Reading:				
Low Pressure Reading:				

## November 2024

Mon	Tues	Wed	Thurs	Fri	Sat	Sun
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	

Monthly Amount of PCE Purchased	
Monthly Total (gal):	
If no PCE is purchased this month enter '0'.	

REMEMBER TO RECORD ALL PCE PURCHASES ON PAGE 1.

Perceptible Leak Repairs	
Repair leaks within 24 hours. Order parts within two working days and repair within five working upon receipt.	
Date Parts Ordered:	
Date Parts Received:	
Date of Repairs:	

Separator Water Treatment: Carbon Filter Changes	
Enter the amount of PCE water treated since the last carbon filter change.	
Date of Filter Change:	
Amount of Treated Water (gal):	

Operating and Maintenance Requirements	
Dry cleaning machines, refrigerated condenser, probes and sensors, and the separator water treatment unit must be maintained according to the manufacturer. Keep the manual and maintenance records onsite. If any operating parameters are observed to be outside the manufacturers' limits, adjustments or repairs must be made. If new parts are needed, order within two working days and repair within five working days upon receipt.	

Weekly Perceptible Leak Check					
Check while the dry cleaning unit is in operation.					
Remember at least once this month you must use a halogenated hydrocarbon detector or PCE gas analyzer for your weekly perceptible leak check.					
Date of Inspection:					
Was a leak detected? Check Yes or No:					
Hoses, Fittings, and Couplings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Pipe Connections and Valves	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Door Gaskets and Seatings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Filter Gaskets and Seatings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Pumps	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Solvent Tanks and Containers	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Water Separators	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Muck Cookers	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Stills	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Exhaust Damper	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Diverter Valves	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
All Filter Housings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Was a detector or analyzer used for this reading? Remember at least once this month you must use a detector or analyzer.					
Check Yes or No:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

ONLY COMPLETE THE TEMPERATURE OR PRESSURE CHECK, NOT BOTH.

Weekly Refrigerated Condenser Temperature Checks				
At the end of cool-down or drying cycle check the temperature of the air exiting the refrigerated condenser to confirm it is equal to or less than 45°F ( 7.2°C ).				
Date of Reading:				
Temperature Reading:				

Weekly Refrigerated Condenser High and Low Pressure Checks				
During the drying phase check the high and low pressure to confirm it is within the range specified by the manufacturer.				
Date of Reading:				
High Pressure Reading:				
Low Pressure Reading:				

**December 2024**

Mon	Tues	Wed	Thurs	Fri	Sat	Sun
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

Monthly Amount of PCE Purchased	
Monthly Total (gal):	
If no PCE is purchased this month enter '0'.	

**REMEMBER TO RECORD ALL PCE PURCHASES ON PAGE 1.**

Perceptible Leak Repairs	
Repair leaks within 24 hours. Order parts within two working days and repair within five working upon receipt.	
Date Parts Ordered:	
Date Parts Received:	
Date of Repairs:	

Separator Water Treatment: Carbon Filter Changes	
Enter the amount of PCE water treated since the last carbon filter change.	
Date of Filter Change:	
Amount of Treated Water (gal):	

Operating and Maintenance Requirements	
Dry cleaning machines, refrigerated condenser, probes and sensors, and the separator water treatment unit must be maintained according to the manufacturer. Keep the manual and maintenance records onsite. If any operating parameters are observed to be outside the manufacturers' limits, adjustments or repairs must be made. If new parts are needed, order within two working days and repair within five working days upon receipt.	

Weekly Perceptible Leak Check						
Check while the dry cleaning unit is in operation.						
Remember at least once this month you must use a halogenated hydrocarbon detector or PCE gas analyzer for your weekly perceptible leak check.						
Date of Inspection:						
Was a leak detected? Check Yes or No:						
Hoses, Fittings, and Couplings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Pipe Connections and Valves	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Door Gaskets and Seatings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Filter Gaskets and Seatings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Pumps	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Solvent Tanks and Containers	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Water Separators	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Muck Cookers	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Stills	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Exhaust Damper	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Diverter Valves	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
All Filter Housings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Was a detector or analyzer used for this reading? Remember at least once this month you must use a detector or analyzer.						
Check Yes or No:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

**ONLY COMPLETE THE TEMPERATURE OR PRESSURE CHECK, NOT BOTH.**

Weekly Refrigerated Condenser Temperature Checks				
At the end of cool-down or drying cycle check the temperature of the air exiting the refrigerated condenser to confirm it is equal to or less than 45°F ( 7.2°C ).				
Date of Reading:				
Temperature Reading:				

Weekly Refrigerated Condenser High and Low Pressure Checks				
During the drying phase check the high and low pressure to confirm it is within the range specified by the manufacturer.				
Date of Reading:				
High Pressure Reading:				
Low Pressure Reading:				

## January 2025

Mon	Tues	Wed	Thurs	Fri	Sat	Sun
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

Monthly Amount of PCE Purchased	
Monthly Total (gal):	
If no PCE is purchased this month enter '0'.	

REMEMBER TO RECORD ALL PCE PURCHASES ON PAGE 1.

Perceptible Leak Repairs	
Repair leaks within 24 hours. Order parts within two working days and repair within five working upon receipt.	
Date Parts Ordered:	
Date Parts Received:	
Date of Repairs:	

Separator Water Treatment: Carbon Filter Changes	
Enter the amount of PCE water treated since the last carbon filter change.	
Date of Filter Change:	
Amount of Treated Water (gal):	

Operating and Maintenance Requirements	
Dry cleaning machines, refrigerated condenser, probes and sensors, and the separator water treatment unit must be maintained according to the manufacturer. Keep the manual and maintenance records onsite. If any operating parameters are observed to be outside the manufacturers' limits, adjustments or repairs must be made. If new parts are needed, order within two working days and repair within five working days upon receipt.	

Weekly Perceptible Leak Check					
Check while the dry cleaning unit is in operation. Remember at least once this month you must use a halogenated hydrocarbon detector or PCE gas analyzer for your weekly perceptible leak check.					
Date of Inspection:					
Was a leak detected? Check Yes or No:					
Hoses, Fittings, and Couplings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Pipe Connections and Valves	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Door Gaskets and Seatings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Filter Gaskets and Seatings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Pumps	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Solvent Tanks and Containers	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Water Separators	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Muck Cookers	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Stills	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Exhaust Damper	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Diverter Valves	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
All Filter Housings	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Was a detector or analyzer used for this reading? Remember at least once this month you must use a detector or analyzer.					
Check Yes or No:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

ONLY COMPLETE THE TEMPERATURE OR PRESSURE CHECK, NOT BOTH.

Weekly Refrigerated Condenser Temperature Checks				
At the end of cool-down or drying cycle check the temperature of the air exiting the refrigerated condenser to confirm it is equal to or less than 45°F ( 7.2°C ).				
Date of Reading:				
Temperature Reading:				

Weekly Refrigerated Condenser High and Low Pressure Checks				
During the drying phase check the high and low pressure to confirm it is within the range specified by the manufacturer.				
Date of Reading:				
High Pressure Reading:				
Low Pressure Reading:				