

# Welding Machine Maintenance Checklist

## 1. Header Section

- **Company Name:** [Insert Name]
- **Machine Type/Serial Number:** [Insert Type/Serial Number]
- **Date of Inspection:** [Insert Date]
- **Technician/Inspector Name:** [Insert Name]

## 2. Safety Checks

Checklist Item	Status (Yes/No/NA)	Notes/Comments
Availability of Fire Extinguisher	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	[Notes]
Availability of PPE (Gloves, Helmet)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	[Notes]
Emergency Stop Button	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	[Notes]

## 3. Mechanical & Electrical Inspection

Checklist Item	Status (Yes/No/NA)	Notes/Comments
Power Cord and Plug	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	[Notes]
Electrode Holder Condition	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	[Notes]

Cooling Fan	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	[Notes]
Ground Clamp Condition	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	[Notes]
Circuit Breakers and Fuses	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	[Notes]

#### 4. Final Assessment

- **Machine Status:** ☐ Good ☐ Requires Repair ☐ Critical Issue
- **Inspector's Signature:** [Insert Name/Signature]