



Kitchen Equipment Maintenance Checklist: Restaurant Appliance Safety & Functionality

Daily Checks (Before Service)

Quick visual inspections and operational tests performed before each service period.

Service Start Time Confirmed

Oven Functionality

- ☐ Working Correctly
- ☐ Minor Issue
- ☐ Not Working

Refrigerator Temperature

- ☐ Within Range
- ☐ Too Warm
- ☐ Too Cold

Gas Pressure (if applicable)

Enter a number...

Exhaust Hood Functionality

- ☐ Working Correctly
- ☐ Minor Issue
- ☐ Not Working

Checked by:

Weekly Maintenance

Tasks performed weekly to ensure consistent performance and prevent minor issues from escalating.

Oven Temperature Calibration (Fahrenheit)

Refrigerator Temperature (Fahrenheit)

Fryer Oil Condition

- ☐ Excellent
- ☐ Good
- ☐ Fair
- ☐ Poor

Dishwasher Cycle Performance

- ☐ Excellent
- ☐ Good
- ☐ Fair
- ☐ Poor

Last Filter Replacement (Water)

Enter date...

Any Unusual Noises or Observations?

Write something...

Ice Machine Production (lbs)

Enter a number...

Monthly Deep Cleaning

Thorough cleaning and sanitization tasks performed monthly.

Detailed Cleaning Notes

Write something...

Photos of Cleaning

 Upload File

Oven Interior Temperature (after cleaning)

Enter a number...

Hood Filter Condition

- ☐ Excellent
- ☐ Good
- ☐ Fair
- ☐ Poor

Date of Filter Replacement (if applicable)

Enter date...

Description of Grease Buildup (if any)

Write something...

Annual Servicing & Inspections

Scheduled professional servicing and safety inspections by qualified technicians.

Last Servicing Date

Enter date...

Oven Temperature Calibration (Celsius)

Enter a number...

Freezer Temperature Calibration (Celsius)

Enter a number...

Gas Leak Test Result

☐ Pass

☐ Fail

☐ N/A


Electrical Safety Inspection Result

☐ Pass

☐ Fail

☐ N/A

Attach Service Report

 Upload File

Technician's Notes/Recommendations

Write something...

HVAC System Inspection Result

- ☐ Pass
- ☐ Fail
- ☐ N/A

Safety Checks & Emergency Procedures

Verifying safety features and confirming familiarity with emergency protocols.

Fire Extinguisher Last Inspection Date

Emergency Lighting Functionality

- ☐ Working
- ☐ Needs Repair

Emergency Exit Routes Clear?

- ☐ All Routes Clear
- ☐ Obstruction on Route 1
- ☐ Obstruction on Route 2

Date of Last Fire Safety Training

Notes on any Safety Concerns Observed

Write something...

Gas Leak Detector Functioning Correctly?

☐ Yes

☐ No

Time of Last Emergency Drill