



# WEEKLY UPS INSPECTION

Facility/office/site: \_\_\_\_\_

Date: \_\_\_\_\_

Inspector: \_\_\_\_\_

- 1. UPS Status (start) \_\_\_\_\_
- 2. Supply voltage \_\_\_\_\_
- 3. Output voltage \_\_\_\_\_
- 4. Load percentage \_\_\_\_\_
- 5. General condition of UPS \_\_\_\_\_
- 6. General cleanliness of UPS \_\_\_\_\_

Notes:

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The contents of this document may be eligible for public disclosure. Social Security Numbers are considered confidential information and will be redacted in the event of such a request. This form is governed by Executive Order 16-01, RCW 42.56, and RCW 40.14.

Distribution: **ORIGINAL** - Maintenance

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