

Clarendon County Fire Department

Apparatus Maintenance Sheet

Month _____	Apparatus ID _____	Mileage	Start _____	End _____				
Daily Inspection Completed			Weekly Preventive Maintenance Completed					
	Signature	Date	Signature	Date	Signature		Fluids Added	
1		17						
2		18						
3		19						
4		20						
5		21						
6		22	Fuel Log					
7		23	Date	Mileage	Gallons	Card Used	Initials	Fuel Trl or Pump
8		24						
9		25						
10		26						
11		27						
12		28						
13		29						
14		30						
15		31						
16								