

**ANNEXURE-IV**

**PREVENTIVE MAINTENANCE OF UPS INSTALLED in DEPARTMENT OF POSTS,  
WESTERN REGION, COIMBATORE**

Office Name :  
Location/Address :  
Telephone No. :  
Officer Name :  
Email-id :  
Period :  
Date :  
M/c Type (with Sl.No ) :  
M/c Configuration :

**(Use separate PM sheet for each equipment)**

Rating of Unit :  
Sl. No:  
Battery rating/make  
Sl.No  
Installation Date  
Starting date of AMC  
Closing date of AMC Date of renewal

<b>Sl</b>	<b>PM Date</b>	<b>Time</b>	<b>Charging Voltage</b>	<b>Battery Voltage</b>	<b>Remarks</b>
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**User**  
Name :  
Designation:  
:

**Officer Incharge**  
Name :  
Designation :  
Signature :

**Engineer**  
Name :  
Organisation :  
Signature :

Date stamp of Office