## ASSET OPERATIONAL STATUS SHEET

## PROJECT TITLE / NAME:

FORM F

PAGE OF

## MAXIMO

No:

A const No	Asset Type	Correct Valve Position	Actual Valve Position on arrival	Located as per plan		Amended plan attached		Valve Operation			Description of	Date repairs	Actual Valve Position
Asset No.				Yes	NO	Yes	No	NO OF TURNS	Direction	Time to close	repairs required	Completed	on departure

The above valves have been located and are accessible and operational for isolation.

Person responsible for conducting inspection (Print name):

(Signature)	Date:
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