

RP 500 Desktop Capping Machine - Daily Equipment Log Sheet

Machine ID / Serial No: _____ Department / Line: _____

Operator Name: _____ Supervisor Name: _____

Date	Start	End	Operator	Cleaning v	Chuck v	Torque (Y/N)	Incidents / Notes

[OK] Daily Checklist

Before use: ☐ Power cable and plug inspected ☐ Air pressure 0.4-0.6 MPa ☐ Chuck clean ☐ Height set

After use: ☐ Surface cleaned ☐ Chuck/Base cleaned ☐ Air bled ☐ Issues reported

[Tools] Notes Section (continued)

Use this space to report unusual vibrations, misalignments, part wear, or corrective actions taken:

Signed (Operator): _____ Date: _____ Signed (Supervisor): _____ Date Reviewed: _____