

Event AV Equipment Maintenance Checklist

Maintenance

DATE ____/____/____	TECHNICIAN	VENUE / ROOM
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PROJECTORS & SCREENS

 Projector powers on and displays correctly OK Issue N/A

Lamp hours remaining _____ hrs

 Lens clean and focused OK Cleaned N/A

 Filter cleaned or replaced OK Cleaned Replaced N/A

 Remote control batteries fresh OK Replaced

 Projection screen clean and undamaged OK Damaged N/A

 Screen motor / mechanism working OK Issue N/A

AUDIO — SPEAKERS & AMPLIFIERS

 All speakers producing clean sound OK Distorted Dead

 Speaker mounts and rigging secure OK Loose

 Amplifier powers on, no overheating OK Issue

	OK	ISSUE	N/A
Subwoofer functioning	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Foldback / monitor speakers tested	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

AUDIO — MICROPHONES & MIXING

 Wired microphones tested OK Issue N/A

 Wireless mic batteries replaced Done N/A

	OK	ISSUE
Wireless frequencies clear (no interference)	<input type="radio"/>	<input type="radio"/>
Mixing console powers on and all channels work	<input type="radio"/>	<input type="radio"/>

 DI boxes tested OK Issue N/A

 Feedback suppression configured Yes No N/A

LIGHTING

 All fixtures power on OK Failures Found

 Burnt-out lamps replaced None Needed Replaced Parts Ordered

 DMX control responding correctly OK Issue N/A

 Colour gels and gobos in good condition OK Replaced N/A

 Rigging points and safety cables inspected OK Issue

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Lighting desk firmware current Yes Updated N/A

CABLING & CONNECTIONS

	OK	FAULTY
XLR cables tested	<input type="radio"/>	<input type="radio"/>
HDMI/SDI cables tested	<input type="radio"/>	<input type="radio"/>
Power cables inspected for damage <input type="checkbox"/> OK <input type="checkbox"/> Damaged		
Ethernet / network cables tested <input type="checkbox"/> OK <input type="checkbox"/> Faulty		
Cable runs tidy and taped down <input type="checkbox"/> OK <input type="checkbox"/> Needs Work		
Spare cables stocked <input type="checkbox"/> Yes <input type="checkbox"/> Low <input type="checkbox"/> No		

ISSUES & ACTIONS

Items removed for repair

Parts / replacements ordered _____

Technician signature _____

Notes

