

Job / Site Details

Customer / Site Name	Work Order #
Site Address	System / Asset ID
Technician / Crew	Date / Start Time
Weather / Site Conditions	Visit Type: PM / Repair / Cleaning / Warranty / Emergency
Customer Contact	Access Notes / Gate Codes

Safety Gate - Complete Before Inspection

If any Critical safety item fails, stop work and escalate before continuing.

Safety Check	OK	Issue	N/A	Notes / Escalation
PPE available and worn as required	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Roof/ladder/fall-protection conditions safe	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Emergency shutoff accessible and identified	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
No exposed conductors, arc-flash concern, fire hazard, or unsafe structure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Work area clear and customer/site contact notified if required	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Required Closeout Proof

- Failed-item photos attached
- Inverter/error-code photo attached
- Readings recorded
- Repair priority assigned
- Follow-up action selected

Solar Panel Maintenance Checklist - Onsite Technician Copy

Use one checklist per site visit

Field Inspection Checks

Complete status, photo #, priority, and action notes before closing the visit.

#	Area	Check	OK	Issue	N/A	Photo #	Pri.	Notes / Action
1	Site setup	Confirm site address, customer contact, asset ID, and visit type.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	
2	Site setup	Review previous inspection notes, open issues, and customer complaints before work starts.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	
3	Site setup	Record weather, roof/access conditions, and visible site hazards.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	
4	Site setup	Confirm access to inverter, disconnects, combiner boxes, roof/array area, and monitoring equipment.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	
5	Safety	Confirm required PPE, ladder safety, fall protection, and lockout/tagout requirements.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	
6	Safety	Verify emergency shutoff location is accessible and clearly identified.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	
7	Safety	Check warning labels and electrical hazard labels are present and readable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	
8	Safety	Clear immediate fire hazards, blocked equipment access, or unsafe working conditions before inspection.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	
9	Safety	Stop work and escalate any arc-flash, exposed conductor, roof, or structural safety risk.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	
10	Panels	Inspect module glass for cracks, chips, shattered glass, or impact damage.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	
11	Panels	Inspect module frames for bending, separation, corrosion, or loose alignment.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	
12	Panels	Check for discoloration, burn marks, delamination, or suspected hot spots.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	
13	Panels	Check for dirt, dust, pollen, bird droppings, leaves, or debris reducing production.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	
14	Panels	Identify new shading from trees, vents, equipment, nearby buildings, or roof obstructions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	
15	Panels	Check for pest, bird, or nesting activity around panels and wiring.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	
16	Panels	Capture photos for damaged, heavily soiled, shaded, or suspicious modules.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	

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Field Inspection Checks

Complete status, photo #, priority, and action notes before closing the visit.

#	Area	Check	OK	Issue	N/A	Photo #	Pri.	Notes / Action
17	Mounting	Verify visible clamps, rails, and fasteners are present and secure.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	
18	Mounting	Check torque/fastening where required by site procedure or manufacturer guidance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	
19	Mounting	Inspect racking for movement, corrosion, bent rails, missing hardware, or structural damage.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	
20	Mounting	Inspect roof penetrations, flashing, sealant, and nearby roof condition.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	
21	Mounting	Check ground-mount foundations, erosion, vegetation, or drainage concerns if applicable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	
22	Electrical	Inspect visible wiring for cuts, abrasion, exposed conductors, sagging, or loose routing.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	
23	Electrical	Verify connectors are secure, matched correctly, and free of visible damage.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	
24	Electrical	Inspect conduit, cable trays, fittings, and junction boxes for damage or water intrusion.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	
25	Electrical	Verify grounding and bonding condition where visible and accessible.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	
26	Electrical	Inspect AC/DC disconnects for access, labeling, covers, corrosion, and visible damage.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	
27	Electrical	Inspect combiner boxes for heat marks, loose covers, water, corrosion, or damaged components.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	
28	Electrical	Capture photos for failed electrical items, missing labels, water intrusion, or heat damage.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	
29	Inverter	Record inverter make/model/serial number if not already listed on the job record.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	
30	Inverter	Record inverter operating status and exact error/warning codes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	
31	Inverter	Check ventilation clearance, fan condition if applicable, and overheating signs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	
32	Inverter	Inspect inverter housing, conduit entries, seals, and mounting for physical damage or corrosion.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	

Field Inspection Checks

Complete status, photo #, priority, and action notes before closing the visit.

#	Area	Check	OK	Issue	N/A	Photo #	Pri.	Notes / Action
33	Inverter	Confirm monitoring/communication status and note offline or intermittent devices.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	____	
34	Performance	Record current production and compare against expected output when data is available.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	____	
35	Performance	Record voltage readings according to site procedure.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	____	
36	Performance	Record current readings according to site procedure.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	____	
37	Performance	Check string-level or inverter-level inconsistencies where monitoring data is available.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	____	
38	Performance	Review monitoring alerts and customer-reported performance issues.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	____	
39	Cleaning	Confirm whether panel cleaning is required, completed, recommended, or outside scope.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	____	
40	Cleaning	Remove loose debris where included in the work scope.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	____	
41	Cleaning	Document vegetation that may cause shading, block access, or affect ground-mount drainage.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	____	
42	Cleaning	Check drainage issues, standing water, roof debris, or soil buildup near array/equipment.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	____	
43	Follow-up	Assign priority to every failed item: Critical, High, Medium, or Low.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	____	
44	Follow-up	List parts, access needs, customer approval, or supervisor review required for repair.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	____	
45	Follow-up	Create or request a follow-up work order for each unresolved failed item.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	____	
46	Closeout	Attach required photos, readings, notes, and before/after images before leaving site.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	____	
47	Closeout	Review findings with customer/site contact when required and collect signature.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	____	

Readings, Issue Log, and Sign-Off

Inverter / Performance Readings

Inverter Status	Error Code(s)	Current Production	Monitoring Status
Voltage Reading(s)	Current Reading(s)	Expected Output / Notes	Performance Concern? Y/N

Issue Log - Complete One Row per Failed Item

#	Failed Item / Location	Photo #	Priority	Parts / Access Needed	Follow-Up Action	Owner / Due Date
1						
2						
3						
4						
5						
6						
7						
8						

Closeout Action

- No follow-up required
 Schedule repair
 Schedule cleaning
 Order parts
 Customer approval needed
 Supervisor review needed
 Warranty claim
 Monitor next cycle

Sign-Off

Technician Signature / Date	Customer or Site Contact / Date	Office Review / Date
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