

## POU water filters daily checklist

Ward: .....

Contact for issues:

Estates: .....

IPCT: .....

| Date | POU Location | Date POU water filter fitted | POU water filter in place Y/N | POU water filter visibly damaged Y/N | POU water filter leaking Y/N | Water flowing Y/N | Replacement due Y/N | Action taken | Signed |
|------|--------------|------------------------------|-------------------------------|--------------------------------------|------------------------------|-------------------|---------------------|--------------|--------|
|      |              |                              |                               |                                      |                              |                   |                     |              |        |
|      |              |                              |                               |                                      |                              |                   |                     |              |        |
|      |              |                              |                               |                                      |                              |                   |                     |              |        |
|      |              |                              |                               |                                      |                              |                   |                     |              |        |

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