		nspection lectrical			Record No.: ——page 1 of 2			
Client:			Subcontractor:					
Project No.:			Subcontract P.0	D. No.:				
Project Name:		Heat tracing sys	stem:					
	ional Information:		Trace Heating F					
I	rence Document:		Trace Freating F	arioi.				
Items to inspect		Subcontractor Company			Remarks			
•			inspected initials/date	Hold Point	inspected* initials/date			
1.0	Line identification no.:							
2.0	Check type of trace heating cable							
3.0	Check installation of traces are isometric							
4.0	Megger test prior to insulation							
5.0	Check location of junction boxes							
6.0	Junction box identification:							
7.0	Proper enclosure for area classification							
8.0	Feeder cables identification							
9.0	Feeder cables size (check with drawings)	:						
10.0	Cables type:							
11.0	Length: From T	Го						
12.0	Continuity:							
13.0	Cables ties: Type:							
14.0	All connections are tight							
15.0	Terminals and connections identified							
16.0	Glands installed correctly, waterproof							
17.0	Megger test cores to earth only, after insta	allation						
l	mpany's presence is mandatory for all activities in section mpany's presence is mandatory.	Attachments, No. of			r pages:			
	Accepted for Subcontractor	Accepted for	or Com	npany	Accepted for Client			
Name: Name:						Name:		
Signature: Signatu			ire:			Signature:		
Date: Date:			, -			Date:		

*Company only initials for holdpoint

	Insp	Record No.: ——page 2 of 2							
Clien	t:		Subcontractor:				<u> </u>		
Project No.: ———			Subcontract P.0	O No:					
Project Name:			Heat tracing system:						
	ional Information:		Trace Heating	Panel:					
Reference Document:			Subcontractor Company				Remarks		
Items to inspect			inspected initials/date	Hold Point	inspected* initials/date		romano		
18.0	Energize circuit and check amperage colo condition	d							
19.0	Check temperature and amperage after a minimum of 48 hours of service	ı							
	Current:								
	Circuit breaking rating:								
20.0	Amperage reading								
	Note:								
	Do not megger between cores on self regulating tracing cable!								
•									
I	mpany's presence is mandatory for all activities in section mpany's presence is mandatory.	Attachments, No. of							
Accepted for Subcontractor			Accepted for Company			Acc	epted for Client		
Name: Name:						Name:	<u> </u>		
Signature: Signa			ure:			Signature:			
Date: Date:		Date:				Date:			

*Company only initials for holdpoint