

Inspection Record for Instrument Installation and Mechanical Acceptance Form

Record No.: _____

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Client: _____	Subcontractor: _____
Project No.: _____	Subcontract P.O. No.: _____
Project Name: _____	

<u>Additional Information:</u>	On Line No.:
Instr. Tag No.:	On Equipment:
Turnover System No.:	Instrument Location:

Reference Document: _____

Items to inspect	Subcontractor	Company		Remarks
	inspected initials/date	Hold Point	inspected* initials/date	
1.0 Pre-installation calibration				
2.0 Zero-mid-scale-maximum by precision manometer				
3.0 Stroked and positioner action finally adjusted				
4.0 Torque setting-limit switches finally adjusted				
5.0 Cable continuity and megger test				
6.0 Impulse piping fluid				
7.0 Impulse piping tested 1.5 x operating pressure				
8.0 Signal lines blown with clean dry air				
9.0 Signal leak tested with air at 1 bar GA				
10.0 Instrument functionally tested				
11.0 Instrument visual inspection				
12.0 Trip and alarm tested and calibrated				

H - Company's presence is mandatory for all activities in section.

h - Company's presence is mandatory.

Attachments, No. of pages: _____

Accepted for Subcontractor	Accepted for Company	Accepted for Client
Name: _____	Name: _____	Name: _____
Signature: _____	Signature: _____	Signature: _____
Date: _____	Date: _____	Date: _____

* Company only initials for holdpoint

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page 2 of 2

Client: _____	Subcontractor: _____
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Items to inspect	Subcontractor		Company		Remarks
	inspected initials/date	Hold Point	inspected [*] initials/date		
13.0 Instrument air supply tested					
14.0 Instrument air supply clean and dry					
15.0 Power supply [] 24 VDC [] 220 VAC					
Contractor confirms that the above items are installed in accordance with the drawings, specifications and contract requirements.					
All documented evidence required to support this statement has been completed and approved.					

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Signature: _____	Signature: _____	Signature: _____
Date: _____	Date: _____	Date: _____

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