Inspection Record for Record No .: -On-line Stream Analyzers (General) and page 1 of 2 **Analyzer House** Client: Subcontractor: Project No.: Subcontract P.O. No.: Project Name: Analyzer House No .: Additional Information: Service: Instr. Tag No.: Manufacturer: Reference Document: Type: 1.0 Physical check: 1.1 Sample transport lines (tick if applicable) Checked 1.3 Sample conditioning rack (tick if applicable) Sample take-off point Installation П Installation Steam tracing П П Leak tested Insulation Leak tested Purged П П Insulation Cleaned П Steam tracing Purged Materials Filters 1.4 1.2 Sample pre-conditioning (tick if applicable) Analyzer (tick if applicable) Installation Installation П Sample lines Steam tracing Insulation Steam tracing Leak tested Insulation Cleaned **HVAC** safeguarding Purged Electrical protection Filters Earthing Electrical installation This document should be complete with: Analyzer data sheet Analyzer verification report

 Name:

 Name:

 Signature:
 Signature:
 Signature:

 Date:

 Date:

Accepted for Company

Accepted for Subcontractor

Accepted for Client

Record No .: -**Inspection Record for** On-line Stream Analyzers (General) and page 2 of 2 **Analyzer House** Client: Subcontractor: Project No.: Subcontract P.O. No.: Project Name: Analyzer House No.: Additional Information: Service: Instr. Tag No.: Manufacturer: Reference Document: Type: 2.0 Analyzer house utilities 2.1 2.4 Fire detectors (tick if applicable) **Door switches** (tick if applicable) Installation Installation Electrical connections Electrical connections Interconnecting wiring Interconnecting wiring Verification* Verification* 2.2 2.5 Gas detectors (tick if applicable) Service socket (tick if applicable) Installation Installation П Electrical connections Electrical connections Interconnecting wiring Interconnecting wiring Verification* Verification* 2.6 2.3 H2S detectors (tick if applicable) Alarm panel and horn (tick if applicable) Installation Installation Electrical connections Electrical connections Interconnecting wiring Interconnecting wiring Verification* Verification* Remarks: *individual verification reports shall be attached Accepted for Client **Accepted for Subcontractor Accepted for Company** Name: Name: Name: Signature: Signature: Signature:

Date:

Date: