



# Energy Recovery Plenum Pre Start-up Checklist

Job Name: \_\_\_\_\_

Serial Number: \_\_\_\_\_

Model Number: \_\_\_\_\_

Tag: \_\_\_\_\_

### Checklist:

The Contractor must complete the checklist below. It is required that a form be completed for each unit received. The form must be signed, dated and returned to us a minimum of one week prior to the scheduled start-up. Failure to do so will impact the scheduled start-up date. Start-up dates must be scheduled a minimum of two weeks in advance. Dates cannot be guaranteed inside of this scheduling period.

	Yes	N/A
1. Has the unit been checked for shipping, storage, and rigging damage?	<input type="checkbox"/>	<input type="checkbox"/>
2. Has the equipment been received as ordered?	<input type="checkbox"/>	<input type="checkbox"/>
3. Have all components and loose parts been received as listed on the Packing List?	<input type="checkbox"/>	<input type="checkbox"/>
4. Have the demount sections been assembled and all components installed? <i>(Multiple section units)</i>	<input type="checkbox"/>	<input type="checkbox"/>
5. Have all internal demount piping connections been completed? <i>(Multiple section units)</i>	<input type="checkbox"/>	<input type="checkbox"/>
6. Have the HW, CW, Steam and Make Up water connections been completed?	<input type="checkbox"/>	<input type="checkbox"/>
7. Have all pipe chases and floor penetrations been sealed?	<input type="checkbox"/>	<input type="checkbox"/>
8. Have all condensate drains been connected and correctly trapped?	<input type="checkbox"/>	<input type="checkbox"/>
9. Has the internal demount wiring been completed? <i>(Multiple section units)</i>	<input type="checkbox"/>	<input type="checkbox"/>
10. Has the Controls Contractor's wiring been completed?	<input type="checkbox"/>	<input type="checkbox"/>
11. Is power available to the unit and at correct voltage?	<input type="checkbox"/>	<input type="checkbox"/>
12. Have the shipping blocks been removed from the applicable components?	<input type="checkbox"/>	<input type="checkbox"/>
13. Has free movement of rotating components been confirmed by hand rotation?	<input type="checkbox"/>	<input type="checkbox"/>
14. Have the fan hub set screws been checked for tightness?	<input type="checkbox"/>	<input type="checkbox"/>
15. Have the bearing set screws been checked for tightness?	<input type="checkbox"/>	<input type="checkbox"/>
16. Have the sheave set screws been checked for tightness?	<input type="checkbox"/>	<input type="checkbox"/>
17. Have the rain-hoods been installed?	<input type="checkbox"/>	<input type="checkbox"/>
18. Have the air filters been installed?	<input type="checkbox"/>	<input type="checkbox"/>
19. Have the air ducts connections been completed?	<input type="checkbox"/>	<input type="checkbox"/>

### Checked by:

The undersigned verifies that all of the above items have been completed. Furthermore, the undersigned understands that if any of these items are not complete and start-up is delayed as a result, a purchase order will be required prior to us returning to the project.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

Company: \_\_\_\_\_

### Notes: