



UPF MISCELLANEOUS STATIONARY EQUIPMENT INSPECTION RECORD

Work Package No.: _____

Task No.: _____

Page 1 of 1

DMC NUMBER:		DATE:			
PROJECT NUMBER:		PROJECT NAME:			
QUALITY LEVEL:	QUALITY (Q)	RISK SIGNIFICANT (RS)	COMMERCIAL CONTROL (CC)		
EQUIPMENT IDENTIFICATION:		DESCRIPTION:		START UP SYSTEM ID:	
BLDG/AREA:		ELEVATION:		SYSTEM:	
REFERENCE DOCUMENT NO.:		REV. NO.:	REFERENCE DOCUMENT NO.:		REV. NO.:
ITEM	ACC	REJ	N/A	FE (initial/date)	QCE/PI (initial/date)
1. Nameplate data is correct					
2. Storage and Maintenance Measures Implemented					
3. Foundation and Anchor Bolts Complete					
4. Slide/Bed Plates Installed and Level					
5. Structural Steel is Complete					
6. Unit is Shimmed and Set					
7. Centerline location is correct					
8. Orientation and Elevations are correct					
9. Plumbness is acceptable					
10. Grouting is complete					
11. Anchor bolts have been tightened or torqued					
12. Piping alignment is acceptable					
13. Installation of Internals is complete					
14. Field testing is complete					
15. Field flushing or cleaning is complete					
16. Internal cleanliness is acceptable					
17. Ladders and platforms are complete					
18. Closures and Manways are complete					
19. Grounding is complete					
20. Instruments and controls are complete					
21. External painting/coatings are complete					
22. Insulation is complete					
COMMENTS:					
FE: (print/sign)				DATE:	
QCE/PI: (print/sign)				DATE:	