

Installation Qualification Operating Environment

(Reference SOP: _____)

Project:	Project No:
Facility Description:	
Manufacturer / Builder:	Equipment No:
Location:	Protocol:

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List only those Materials detailed in the Design Specification. Include floor, wall and ceiling finishes in the facility.

4.3.1. Material of Construction - WALLS

Material Specified: _____

Certification Provided: Yes/No

Document No.: _____

Signed _____

4.3.2. Material of Construction - CEILINGS

Material Specified: _____

Certification Provided: Yes/No

Document No.: _____

Signed _____

4.3.3. Material of Construction - DOORS

Material Specified: _____

Certification Provided: Yes/No

Document No.: _____

Signed _____

4.3.4. Material of Construction - FLOORS

Material Specified: _____

Certification Provided: Yes/No

Document No.: _____

Signed _____

5. ELECTRICAL INSTALLATION

The drawing ID numbers may be included as Attachments.

5.1. Electrical Drawings

5.1.1. Single Line

Drawing Identification Numbers: _____

Electronic copy supplied: Yes/No

Signed _____

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The table below highlights all the rooms allocated to the # 47 project and details the testing requirements that is appropriate for each area.

Room No	Area	EG -Class	Temp	RH%	Lighting	Noise	Differential Pressure	Environmental Monitoring	SCADA System Verification	Checklist

7.2. SOP's

Include all relevant operating procedures for validation plan.

8. PREVENTATIVE MAINTENANCE

8.1. Preventative Maintenance Program Identification:

Include preventative maintenance programs as attachment.

Attachment No.: _____

Signature _____

9. SAFETY

9.1. Safety Devices

Provide reports of all Safety devices incorporated in the rooms.

Safety Devices list provided? Yes / No

Attachment No.: _____

Signature _____

9.2. Fire Protection System

Provide detailed documents describing the Fire Protection System. Refer to sprinkler heads used as well as tests run to show they qualify.

Fire Protection System documents provided? Yes / No

Attachment No.: _____

Signature _____

10. COMMISSIONING OVERVIEW

10.1. Structural

Level	Room _ to Room _	Signed