**INSPECTION & TEST CHECK LIST – 701**

**BOOSTER INSTALLATION**

|  |  |  |  |  |  |  |  |  |
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| **PROJECT** | **Frankston Hospital Redevelopment** | | | | | **JOB No** | | **4400** |
| **ITEM** | | | **N/A** | **CONFORMS**  **YES NO** | | **RE-INSPECT**  **OK** | | **Drg No:**  **(Rev):** |
| **NOTES** |
| 1. Drawing revision | | |  |  |  |  | |  |
| 2. Installed as per drawing | | |  |  |  |  | |  |
| 3. FRV required clearances confirmed | | |  |  |  |  | |  |
| 4. Labelling per stage & level provided | | |  |  |  |  | |  |
| 5. Isolations valves closed & locked | | |  |  |  |  | |  |
| 6. Pressure gauges at T.M pressure | | |  |  |  |  | |  |
| 7. Storz couplings installed to suction points | | |  |  |  |  | |  |
| 8. Hydrostatic Test Completed (1700kpa) | | |  |  |  |  | |  |
| 9. Independent Certification | | |  |  |  |  | |  |
|  | | | | | | | | |
| Checked By;  (Contract***fire***) | | Signature; | | | | | Date; | |
|  | | | | | | | | |
| Checked By;  (Lend Lease) | | Signature; | | | | | Date; | |