**Inspection Checklist – AHU/Fan System Fit Off**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Contractor:** | Dewpoint Group | | | | | |  | | **ITC No.** | | | |  |
| **Area/Location:** |  | | | | | |  | | **Zone:** | | | |  |
| **Drawing No:** |  | | | | | | **Rev :** | | | | | |  |
|  | | | | |  | | | | |  | |  | |
| **Item – Activity** | | | | | **Acceptable** | | | | | **N / A** | | **Comment** | |
| **Yes** | **No** | | | |
| **Flexible Duct.** | | | | | | | | | | | | | |
| Flex installed as per Drawing? | | | | |  |  | | | |  | |  | |
| Have flex hangers been installed as per spec? | | | | |  |  | | | |  | |  | |
| Flex installed with minimal directional changes? | | | | |  |  | | | |  | |  | |
| Flex R value is as per spec? | | | | |  |  | | | |  | |  | |
| Duct bands installed? | | | | |  |  | | | |  | |  | |
| Flex – spigot connections vapour sealed? | | | | |  |  | | | |  | |  | |
| Correct flex size for air flow? | | | | |  |  | | | |  | |  | |
| Have cushion box ends of flex been left closed? | | | | |  |  | | | |  | |  | |
| **Cushion Box.** | | | | |  |  | | | |  | |  | |
| Installed as per drawing? | | | | |  |  | | | |  | |  | |
| CHBX to Flex vapour sealed? | | | | |  |  | | | |  | |  | |
| Clean of dirt and debris | | | | |  |  | | | |  | |  | |
| Duct bands been installed | | | | |  |  | | | |  | |  | |
| **Grilles** | | | | |  |  | | | |  | |  | |
| Clean and flush mounted | | | | |  |  | | | |  | |  | |
| Sitting flush with B-frame | | | | |  |  | | | |  | |  | |
| Correct colour? | | | | |  |  | | | |  | |  | |
| Correct air flow direction | | | | |  |  | | | |  | |  | |
| Weather proofed? | | | | |  |  | | | |  | |  | |
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| Has the system had a duct leakage test | | | | |  | | | What date | | | |  | |
| **Comments** | | | | | | | | If an NCR is raised - # | | | | | |
|  | | | | | | | | Date Closed | | | | | |
|  | | | | | | | | | | | | | |
| **Received by:** | | | *Dewpoint Project Manager* | | | | | | | | Date: | | |
| **Inspected By** | | **Site Foreman / Mgr** | | **Date** | | | | | | | **Project Manager** | | |
|  | |  | |  | | | | | | | Bryce Dunbar | | |
|  | |  | |  | | | | | | |  | | |