| **Client:** |  | | | | | | | | | **Project Name:** | | | |  | | | | | | | | | | | **Job No:** | | | | |  | | | | | | **Sheet:** | | | | Of | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Contract Manager:** | | | |  | | | | | | **Project Manager:** | | | | | |  | | | | | | **Site Supervisor:** | | | | |  | | | | | | | | **Date:** | | |  | | | | |
| **Check Authorised By:** | | | | |  | | | | | **Signature:** | | |  | | | | | | | **Check Delegated To:** | | | | | | | |  | | | | | **Signature:** | | |  | | | | | | |
|  | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| BOARD TYPE OR NUMBER OR AREA | | **ACCEPTANCE CRITERIA** | | | | **MFG QA** | | DAMAGE | | | **LOCATION TO DRAWING** | | | | **EQUIPMENT TO DRAWING** | | | **CONNECTIONS INCOMING & OUTGOING BY HEYDAY.** | | | **NEUTRAL CONNECTIONS CORRESPOND** | | | **CORRECT EARTHING AND SOLIDLY FIXED** | | | | | **POLE FILLERS INSTALLED** | | | **ALL CABLE ENTRIES WITH ESCUTCHEON PLATES AND SEALS FITTED** | | | | | **BOARD SEALED AND LOCKED FOR SAFETY INC: FRONT AND REAR PANELS** | | | | **LABELS AND SCHEDULE LIST CORRECT AND INSTALLED** | |
| **CHECK**  **BY** | **DATE** | | | **CHECK**  **BY** | **DATE** | **CHECK**  **BY** | **DATE** | | **CHECK**  **BY** | **DATE** | | | **CHECK BY** | | **DATE** | **CHECK**  **BY** | **DATE** | | **CHECK**  **BY** | | **DATE** | **CHECK**  **BY** | | **DATE** | | | **CHECK**  **BY** | | **DATE** | **CHECK BY** | | **DATE** | | | **CHECK BY** | | **DATE** | | **CHECK BY** | **DATE** |
|  | |  |  | | |  |  |  |  | |  |  | | |  | |  |  |  | |  | |  |  | |  | | |  | |  |  | |  | | |  | |  | |  |  |
|  | |  |  | | |  |  |  |  | |  |  | | |  | |  |  |  | |  | |  |  | |  | | |  | |  |  | |  | | |  | |  | |  |  |
|  | |  |  | | |  |  |  |  | |  |  | | |  | |  |  |  | |  | |  |  | |  | | |  | |  |  | |  | | |  | |  | |  |  |
|  | |  |  | | |  |  |  |  | |  |  | | |  | |  |  |  | |  | |  |  | |  | | |  | |  |  | |  | | |  | |  | |  |  |
|  | |  |  | | |  |  |  |  | |  |  | | |  | |  |  |  | |  | |  |  | |  | | |  | |  |  | |  | | |  | |  | |  |  |
|  | |  |  | | |  |  |  |  | |  |  | | |  | |  |  |  | |  | |  |  | |  | | |  | |  |  | |  | | |  | |  | |  |  |
|  | |  |  | | |  |  |  |  | |  |  | | |  | |  |  |  | |  | |  |  | |  | | |  | |  |  | |  | | |  | |  | |  |  |
|  | |  |  | | |  |  |  |  | |  |  | | |  | |  |  |  | |  | |  |  | |  | | |  | |  |  | |  | | |  | |  | |  |  |
|  | |  |  | | |  |  |  |  | |  |  | | |  | |  |  |  | |  | |  |  | |  | | |  | |  |  | |  | | |  | |  | |  |  |
|  | |  |  | | |  |  |  |  | |  |  | | |  | |  |  |  | |  | |  |  | |  | | |  | |  |  | |  | | |  | |  | |  |  |
|  | |  |  | | |  |  |  |  | |  |  | | |  | |  |  |  | |  | |  |  | |  | | |  | |  |  | |  | | |  | |  | |  |  |
|  | |  |  | | |  |  |  |  | |  |  | | |  | |  |  |  | |  | |  |  | |  | | |  | |  |  | |  | | |  | |  | |  |  |
|  | |  |  | | |  |  |  |  | |  |  | | |  | |  |  |  | |  | |  |  | |  | | |  | |  |  | |  | | |  | |  | |  |  |
|  | |  |  | | |  |  |  |  | |  |  | | |  | |  |  |  | |  | |  |  | |  | | |  | |  |  | |  | | |  | |  | |  |  |
|  | |  |  | | |  |  |  |  | |  |  | | |  | |  |  |  | |  | |  |  | |  | | |  | |  |  | |  | | |  | |  | |  |  |
|  | |  |  | | |  |  |  |  | |  |  | | |  | |  |  |  | |  | |  |  | |  | | |  | |  |  | |  | | |  | |  | |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **COMMENTS:** |  | | |
|  | | | |
|  | | **NCR No:** |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FINAL ACCEPTANCE** | **NAME** | **SIGNATURE** | **POSITION** | **APPROVED (YES/NO)** | **DATE** |
| **Heyday Group (Representative):** |  |  |  |  |  |
| **Client (Representative):** |  |  |  |  |  |
| **Authority (If Applicable):** |  |  |  |  |  |

*(Client and Authority may elect or not elect to sign the acceptance).*

|  |
| --- |
| **ACCEPTANCE CRITERIA:** AS PER ITP = (1) AS3000 WIRING RULES. (2) SPECIFICATION. (3) LATEST ISSUE OF DRAWINGS. (5) SUPPLY AUTHORITY APPROVAL.  \* Proprietary purchased switchboards excluded |