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| **1. PRELIMINARY** | | | | |
| **Item No.** | **Description of Item** | **Initials** | | |
| **Pass** | **P/L** | **N/A** |
| 1 | Confirm the corresponding ITR - Emergency warning and intercom Installation is complete |  |  |  |
| 2 | Confirm that the test equipment’s are calibrated. |  |  |  |

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| **2. COMMISSIONING** | | | | |
| **Item No.** | **Description of Item** | **Initials** | | |
| **Pass** | **P/L** | **N/A** |
| 3 | Before energizing the cables and wires, check for correct connections and test for short circuits, ground faults, continuity, and insulation and power supply requirement in accordance with AS 1670.4:2018 section 3.5 power supply equipment (PSE). |  |  |  |
| 4 | Verify all the ceiling/surface mounted speakers and horn speakers been tapped to the correct setting in line with amplifier rating. |  |  |  |
| 5 | Verify the SPL within the zone by triggering the alarm signal (either manually or automatically) and measuring the sound levels using a calibrated sound level meter at various points in the zone.  The minimum SPL shall exceed by a least 10 dB the ambient sound pressure level but shall not be less than 75 dB(A). The maximum SPL shall not exceed 105 dB(A) throughout the emergency zone. |  |  |  |
| 6 | Ensure all visual warnings are installed and operational. |  |  |  |
| 7 | Verify interface/integration between the EWIS system and FIP is complete and operational. |  |  |  |
| 8 | Verify the functionality and audio quality check for each intercom handset. |  |  |  |
| 9 | Simulate an EOLR fault by temporarily removing or disconnecting the resistor to check if the control panel detects and signals the fault condition. |  |  |  |
| 10 | Create a short circuit for each speaker line at the last speaker and confirm fault at the control panel. |  |  |  |
| 11 | Ground the circuits and verify response of trouble signals at the control panel. |  |  |  |
| 12 | Confirm all speaker circuits and zones are associated with the EWIS panel are commissioned and functioning correctly in accordance with the cause-and-effect matrix. |  |  |  |
| **3. COMPLETION** | | | | |
| **Item No.** | **Description of Item** | **Initials** | | |
| **Pass** | **P/L** | **N/A** |
| 13 | Visually inspect equipment for damage and cleanliness. |  |  |  |
| 14 | Confirm all labelling is correct as per IFC design. |  |  |  |
| 15 | AS-installed drawings covering the whole system complete as per AS1670.4: 2018. |  |  |  |
| 16 | Provide Installer’s Statement in accordance with AS1670.4: 2018 Appendix F. |  |  |  |
| 17 | Provide Commissioning Statement in accordance with AS1670.4: 2018 Appendix G. |  |  |  |
| 18 | All baseline Data has been recorded as per AS1670.4: 2018. |  |  |  |
| 19 | Confirm all covers and settings are returned to service state on completion of checks. |  |  |  |

**4. COMMENTS**

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| **5. VERIFICATION & SIGN OFF ACCEPTANCE** | | | |
|  | **Completed By (Contractor)** | **Reviewed By (Contractor Supervisor)** | **Reviewed By (client/Consultant)** |
| Print Name |  |  |  |
| Position |  |  |  |
| Company |  |  |  |
| Signature |  |  |  |
| Date |  |  |  |