# ITC – Cable and Wiring

|  |  |  |  |
| --- | --- | --- | --- |
| **Project** |  | **Job Number** |  |
| **Level** |  | **Area/Grid Ref.** |  |
| **System** |  | **QA Check Start Date** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Ref#** | **Criteria** | **Initial**  **X / ✓ / NA** | **Follow-up**  **X / ✓ / NA** | **Comments** |
|  | Check materials used are specified or approved. |  |  |  |
|  | Check that materials are clean & free from damage. |  |  |  |
|  | Check that cables/wires are correctly sized. |  |  |  |
|  | Check that all cables are adequately supported. |  |  |  |
|  | Check that all cables are suitably tied down. |  |  |  |
|  | Check that all fixings are adequately tightened down. |  |  |  |
|  | Check that segregation is provided where required. |  |  |  |
|  | Check that mechanical protection of cables is provided where necessary. |  |  |  |
|  | Check for neatness and workmanship. |  |  |  |
|  | Tick off below for each floor |  |  |  |
| Notes | | | | |
|  | | | | |

## Sign Off/Acceptance

### VAE Representative

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name** | **Company** | **Position** | **Signature** | **Time/Date** |
|  |  |  |  |  |

### Client (or other)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name** | **Company** | **Position** | **Signature** | **Time/Date** |
|  |  |  |  |  |

A copy of this Inspection Test Checklist must be retained onsite.