

Installation and commissioning checklist – iCombi




Feedback form

The following installation and commissioning checklist is designed to help with the installation/commissioning of a RATIONAL-cooking system. Please observe the installation instructions in the original RATIONAL installation manual.

After successful installation/commissioning, the installation and commissioning checklist must be signed by the customer and the technician. Please send the signed feedback form and the filled in unit data back to technicalsupport@rationalusa.com within 14 days after the installation/commissioning. This guarantees that the start of the warranty and information for invoicing are processed correctly.

Company (customer):		Contact person (customer):	
Street:		Postcode:	
Town/Country:		Telephone number:	
E-mail:		Job number:	
Unit serial number:		Serial number UltraVent:	
Company (installer):		Name (technician):	
Installation date:		Commissioning date:	

	Yes	No
The installation of the device was carried out correctly according to the local technical rules and manufacturer specifications and handed over correctly to the customer.	<input type="checkbox"/>	<input type="checkbox"/>
If this is not the case, please add a comment or other information:		

Date:		 Send by E-Mail to: technicalsupport@rationalusa.com
Name technician:		
Signature of Installer:		
Name customer:		
Signature of Customer:		

Installation and commissioning checklist – iCombi



Unit data

The "Installation and commissioning checklist - iCombi appliance data" are for the service technician and must also be returned to RATIONAL.

Company (customer):	
Contact person (customer):	
Unit serial number:	

NOTICE

Safety-critical functions

The unit must not be put into operation if ""No" has been selected.

General information	Yes:	No:	Comments:	
Is the inspection seal free of damage?	<input type="checkbox"/>	<input type="checkbox"/>		
Material is delivered correct, complete and without damage? (unit and accessories)?	<input type="checkbox"/>	<input type="checkbox"/>		
Position and orientation:	Yes:	No:	Comments:	
Are side distances to the walls, ceiling and heat sources complied with?	<input type="checkbox"/>	<input type="checkbox"/>		
Is everything leveled and fixed?	<input type="checkbox"/>	<input type="checkbox"/>		
Water connection:	Yes:	No:	Comments:	
Water properly installed (independent for each unit, 1.5 - 6 bar/150 kPa - 600 kPa, maximum temp 30°C/86°F, soft water)?	<input type="checkbox"/>	<input type="checkbox"/>		
Is the water filter used and installed properly?	<input type="checkbox"/>	<input type="checkbox"/>	Not used:	<input type="checkbox"/>
Water filter type:				
Has a backflow preventer been installed? *if required by law	<input type="checkbox"/>	<input type="checkbox"/>	Not used:	<input type="checkbox"/>

Water connection:	Yes:	No:	Comments:	
Water properly installed (independent for each unit, 1.5 - 6 bar/150 kPa - 600 kPa, maximum temp 30°C/86°F, soft water)?	<input type="checkbox"/>	<input type="checkbox"/>		
Is the water filter used and installed properly?	<input type="checkbox"/>	<input type="checkbox"/>	Not used:	<input type="checkbox"/>
Water filter type:				
Soft water connection	<input type="checkbox"/>	<input type="checkbox"/>	Soft water connection recommended	

Water drain: (* In the event of non-compliance, the unit must not be put into operation.	Yes:	No:	Comments:	
Is the drain connected as required (steam resistant pipe, level, angle)? NOTE: Do not use p-trap/siphon!	<input type="checkbox"/>	<input type="checkbox"/> (*)		
Is a separate drain used for each unit?	<input type="checkbox"/>	<input type="checkbox"/>		

Water drain:	Yes:	No:	Comments:	
Is the drain connected as required (steam resistant pipe, level, angle)? NOTE: Do not use p-trap/siphon!	<input type="checkbox"/>	<input type="checkbox"/>		
Check that there is a siphon on site.	<input type="checkbox"/>	<input type="checkbox"/>		
Is a separate drain used for each unit?	<input type="checkbox"/>	<input type="checkbox"/>		

Power connection electric units: (*) In the event of non-compliance, the unit must not be put into operation.	Yes:	No:	Comments:			
Switch power supply > 240 V > 208/440 V > 480 V	<input type="checkbox"/>	<input type="checkbox"/> (*)				
	<input type="checkbox"/>					
	<input type="checkbox"/>					
Is the connection made according to the installation manual and local regulations (are the phase breaker and power switch accessible)?	<input type="checkbox"/>	<input type="checkbox"/> (*)				
Is the device connected to a residual current circuit breaker in accordance with the installation manual?	<input type="checkbox"/>	<input type="checkbox"/> (*)				
Fuse (current in A)						
Measured voltage in V (with neutral) Maximum permissible tolerance for input voltage: -15% to +10% The unit can be used with frequencies of 50 Hz and 60 Hz without making any technical modifications.			L1-N:	<input type="checkbox"/>	L2-N:	<input type="checkbox"/>
			L3-N:	<input type="checkbox"/>	N-PE:	<input type="checkbox"/>
Are all values in the permissible range?	<input type="checkbox"/>	<input type="checkbox"/> (*)				
Measured voltage in V (without neutral)			L1-L2	<input type="checkbox"/>	L1-L3:	<input type="checkbox"/>
			L2-L3:	<input type="checkbox"/>		
Are all values in the permissible range?	<input type="checkbox"/>	<input type="checkbox"/> (*)				

Power connection gas units: (* In the event of non-compliance, the unit must not be put into operation.	Yes:	No:	Comments:			
Does all the information match the nameplate?	<input type="checkbox"/>	<input type="checkbox"/> (*)				
Is the room size for the number and type of flue gas of the gas units installed in accordance with the installation instructions?	<input type="checkbox"/>	<input type="checkbox"/> (*)				
Gas connection complies with installation manual and local regulations (are the phase circuit breaker and main switch accessible, is the gas valve turned off)?	<input type="checkbox"/>	<input type="checkbox"/> (*)				
Are all gas connections tight?	<input type="checkbox"/>	<input type="checkbox"/> (*)				
Measured voltage in V: Are all values in the permissible range?	<input type="checkbox"/>	<input type="checkbox"/> (*)	L1-N/ L2:	<input type="checkbox"/>	N-PE:	<input type="checkbox"/>
Diameter of the gas pipeline to the unit (at least 3/4" for 202 (20-2/1) 1")? Are all values in the permissible range?	<input type="checkbox"/>	<input type="checkbox"/> (*)				
Static gas pressure in mbar/w.c. : Are all values in the permissible range? Max. Connection flow pressure: 65 mbar / 0.94 psi Max. Connection flow pressure LPG: 58 mbar / 0.84 psi Max. Connection flow pressure natural gas: 30 mbar /	<input type="checkbox"/>	<input type="checkbox"/> (*)				

Preparation of the self-test:	Yes:	No:	Comments:	
Are all screws properly tightened (connecting terminal, contactors)?	<input type="checkbox"/>	<input type="checkbox"/>		
Is the extractor hood installed, activated and does it work accordingly?	<input type="checkbox"/>	<input type="checkbox"/>	Not used:	<input type="checkbox"/>
Is the air baffle closed and secured? Is the packaging removed from the cabinet? Are closed GN containers placed in the middle of the fan wheels (upside down)?	<input type="checkbox"/>	<input type="checkbox"/>		
Has the unit door adjustment been carried out?	<input type="checkbox"/>	<input type="checkbox"/>		

Self-tests (*) In the event of non-compliance, the unit must not be put into operation.	Yes:	No:	Comments:
Are all water and drain connections tight?	<input type="checkbox"/>	<input type="checkbox"/> (*)	
Has the self-test been successfully completed?	<input type="checkbox"/>	<input type="checkbox"/> (*)	

Power consumption measurement after self-test (electrical units):						
Power consumption in A at 100% steam:	L1:	<input type="checkbox"/>	L2:	<input type="checkbox"/>	L3:	<input type="checkbox"/>
Power consumption in A at 100% hot air:	L1:	<input type="checkbox"/>	L2:	<input type="checkbox"/>	L3:	<input type="checkbox"/>

Exhaust gas analysis after self-test: (*) In the event of non-compliance, the unit must not be put into operation.	Yes:	No:	Comments:					
Does all the information match the nameplate?	<input type="checkbox"/>	<input type="checkbox"/> (*)						
Dynamic gas pressure in mbar/w.c. (at 300°C/572°F hot air at hot air valve):	<input type="checkbox"/>	<input type="checkbox"/>						
Does the set CO ₂ - / CO value correspond to the information in the unit software according to the set gas type?	<input type="checkbox"/>	<input type="checkbox"/> (*)						
Is the gas type converted? Attach a new nameplate and inform RATIONAL about a change of gas type.	<input type="checkbox"/>	<input type="checkbox"/>						
Gas type:	G20:	<input type="checkbox"/>	G25:	<input type="checkbox"/>	G30:	<input type="checkbox"/>	G31:	<input type="checkbox"/>
	13A/12A:			<input type="checkbox"/>	Nat. Gas US:			<input type="checkbox"/>
Burner:	Values at max. RPM				Values at min. RPM			
	CO ₂		CO		CO ₂		CO	
Steam:	<input type="checkbox"/>	%	<input type="checkbox"/>	ppm	<input type="checkbox"/>	%	<input type="checkbox"/>	ppm
Hot air top:	<input type="checkbox"/>	%	<input type="checkbox"/>	ppm	<input type="checkbox"/>	%	<input type="checkbox"/>	ppm
Hot air bottom:	<input type="checkbox"/>	%	<input type="checkbox"/>	ppm	<input type="checkbox"/>	%	<input type="checkbox"/>	ppm

Function test/training:	Yes:	No:	Comments:	
Is the unit updated to the latest software version?	<input type="checkbox"/>	<input type="checkbox"/>	Software version:	
Is a correct service telephone number, time and date set?	<input type="checkbox"/>	<input type="checkbox"/>		
Customer advised in basic operation (cooking models) and safety instructions according to "technical customer instructions (checklist)"?	<input type="checkbox"/>	<input type="checkbox"/>		
ConnectedCooking:	Yes:	No:	Comments:	
Has the customer been informed about ConnectedCooking?	<input type="checkbox"/>	<input type="checkbox"/>		
Is the connection to ConnectedCooking possible (QR Code Display)?	<input type="checkbox"/>	<input type="checkbox"/>		
Total installation: (*) In the event of non-compliance, the unit must not be put into operation.	Yes:	No:	Comments:	
Does the installation comply with the requirements of the installation manual and all valid local laws, norms and standards?	<input type="checkbox"/>	<input type="checkbox"/> (*)		
Only California: Was the "Proposition 65" sticker attached to the unit?	<input type="checkbox"/>	<input type="checkbox"/>		
Total installation:	Yes:	No:	Comments:	
Does the installation comply with the requirements of the installation manual and all valid local laws, norms and standards? If "No" the unit must not be put into operation.	<input type="checkbox"/>	<input type="checkbox"/>		

