

Planning, Design & Construction Campus Facilities

117 General Services Building Columbia, MO 65211-3200

PHONE (573) 882-1133 FAX (573) 882-1175 **Date:**

Emergency Generator Construction Checklist

Project:							
Date:							
Building:							
Location:							
Submittal / Approval	s						
Submittal. The above equipment and systems integral to them are complete and ready for functional testing. The checklist items are complete and have been checked off <u>only by parties having direct knowledge of the event</u> , as marked below, respective to each responsible contractor. This construction checklist is submitted for approval, subject to an attached list of outstanding items yet to be completed. A Statement of Correction will be submitted upon completion of any outstanding areas. None of the outstanding items preclude safe and reliable functional tests being performed List attached.							
Mechanical Contractor	ſ	Date	Controls Contractor	Date			
Electrical Contractor		Date	Sheet Metal Contractor	Date			
TAB Contractor		Date	General Contractor	Date			
Construction checklist items are to be completed as part of startup & initial checkout, preparatory to performing test procedures.							
 This checklist does not take the place of the manufacturer's recommended checkout and startup procedures or report. If this form is not used for documenting, one of similar rigor shall be used. Contractors assigned responsibility for sections of the checklist shall be responsible to see that checklist items by their subcontractors are completed and checked off. 							
Approvals. This filled-out checklist has been reviewed. Its completion is approved with the exceptions noted below.							
Commissioning A	Authority	Date	Owner's Representative	Date			



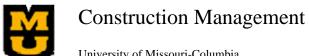
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Generator Information						
Equipment Tag	Location					
System	_					
Manufacturer	Model Nu	ımber				
Serial Number	Capacity					
Volts/Phase Rating	Fuel Type	;				
Other	Other					
Comments:						
	Associated Check	lists				
Automatic Transfer Switch Panel		Oth	ner			
Comments:		L				
Requested Documentation Sub	mitted	Rec'd	Comments			
Manufacturer's cut sheets						
Installation and startup manual and plan						
O&M manuals						
Factory test results						
Sequences and control strategies						
Warranty Certificate						
Comments:						
Installation Checks						
Check if Accentable: Provide comment if unaccentable NA Comment						



University of Missouri-Columbia

PROJECT:

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Date:

General						
Equipment installed per manufacturer's instructions and specifications						
Equipment installed agrees with shop drawings and specifications						
Verify mounting, location and clearances are per plans and specifications						
Inspect for physical, electrical and mechanical condition of equipment and cabinet - no damage evident						
Inspect panels and doors for proper fit and alignment						
Verify the application of manufacturer recommended torque values applied to all electrical power terminations						
Equipment is clean and clear of dust or dirt						
Equipment labels permanently affixed						
Seismic anchoring installed and functional where applicable (non-short circuiting)						
Verify remote monitoring / control panel installed per specification						
Verify interconnection to other systems complete						
Verify neutral low resistance grounding resistor installed and connecter per plans, specifications and manufacturer's recommendations (for 5kV and above rated generators)						
Verify fuel spill containment systems installed per plans and specifications						
Verify motor / generator alignment						
Verify gen set is anchored and grouted						
Verify all fuel line connections						
Verify generator starting system installed per plans, specifications and manufacturer's instructions						
Verify muffler / exhaust system is installed per plan, specifications and manufacturer's instructions						
Check diesel engine crankcase oil level						
Check diesel engine coolant level						
Check diesel engine drive belts						
Check air filter						
Check oil filter						
Check battery						
Check block heater (where applicable)						
Verify intake and relief louvers provided per documents						
Operational Checks						
Check if Acceptable; Provide comment if unacceptable NA Comment						
Specified sequences of operation and operating schedules have been		<u> </u>	Comment			
provided with all variations documented						



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Specified point-to-point checks have been completed and documentation record submitted for this system								
Generator control panel powered, interconnection diagnostics performed								
Multi-generator control / synchronizing control system installed, powered and diagnostics performed								
Sensor and Actuator Calibration All field-installed sensors and gages, and all actuators (dampers and valves) on this piece of equipment shall be calibrated in accordance with Specification Section 01810. All test instruments shall have had a certified calibration within the last 12 months: Y/N Sensors installed <i>in</i> the unit at the factory with calibration certification provided need not be field calibrated.								
Sensor or Actuator Tag	Location	1 st Gage or	lı	Instrument			<i>Final</i> Gage or	Pass
& Location	ок	BAS Value	Mea	Measured Value			BAS Value	Y/N
Comments:								



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*Fill out all	form fields before signing!		
Name	Organization	Title	Signature
5			
	University of Missouri Commi	ssioning Authority	
			(Place Digital Locking Stamp Here)