

IMPORTANT This commissioning report must be submitted to CELMEC to register and validate the warranty.

CLIENT:	DATE:
INSTALLER:	REF NO.
1. SERIAL NO.	10. AIR FLOW SWITCH CORRECT OPERATION <input type="checkbox"/> NOT MAKING <input type="checkbox"/> NOT HOLDING <input type="checkbox"/> OTHER OBSERVATIONS: _____
2. TYPE OF SYSTEM A "U" TUBE PANEL – FORCED DRAUGHT – UP <input type="checkbox"/> B STRAIGHT PANEL – FORCED DRAUGHT – SP <input type="checkbox"/>	
3. CLEARANCE TO COMBUSTIBLES: (mm.) _____ CLEARANCE TO CEILING: (mm.) _____ MOUNTING HEIGHT to under reflector: (mm.) _____	11 ELECTRICAL CHECK Active and Neutral Polarities are correct <input type="checkbox"/>
4. ACCESSORIES fitted: DISCHARGE KIT <input type="checkbox"/> INLET KIT <input type="checkbox"/> SILENCER <input type="checkbox"/> SIDE SHIELDS <input type="checkbox"/> MESH GUARD <input type="checkbox"/> DECORATIVE ENCLOSURE <input type="checkbox"/>	12 AIR PRESSURE AT BURNER GAS VALVE MANIFOLD TEST POINT: (FAN ONLY) _____
5. GAS TYPE (a) N.G. <input type="checkbox"/> (b) L.P.G. <input type="checkbox"/>	13 CORRECT FAN ROTATION: <input type="checkbox"/> (ANTICLOCKWISE AS VIEWED FROM FAN INLET)
6. L.P. GAS TANK (a) CAPACITY – Litres _____ Lt (b) PRESSURE – kPa _____ kPa	14 EXHAUST TEMPERATURE: AFTER 10 MIN. OPERATION: _____ °C
7. IS AN EXTERNAL REGULATOR FITTED TO THE APPLIANCE? <input type="checkbox"/> YES <input type="checkbox"/> NO MAINS PRESSURE kPa _____ kPa - A Pressure Regulator is incorporated in the Combination Gas Control Valve. <i>NOTE! An external Pressure Regulator MUST be installed at the inlet of NG heaters if the inlet gas pressure exceeds 4kPa.</i> <input type="checkbox"/>	15 AIR TEMPERATURE AT BURNER INLET: _____ °C
8. INLET GAS PRESSURE at Unit Inlet: NG. 1.1 – 4.0 kPa <input type="checkbox"/> LPG. 2.75 kPa <input type="checkbox"/> _____ kPa <i>NOTE! Inlet gas pressure must be measured and achieved when all burners including the burner under test and any other gas appliances in the network are running.</i> <input type="checkbox"/>	COMMISSIONING PERSONNEL: CELMEC: <input type="checkbox"/> CLIENT'S INSTALLER: <input type="checkbox"/> OTHER: _____
9. MANIFOLD GAS PRESSURE at Unit Test Point NG. - Required 0.9 kPa <input type="checkbox"/> YES <input type="checkbox"/> NO _____ kPa LPG. - Required 2.5 kPa <input type="checkbox"/> YES <input type="checkbox"/> NO _____ kPa <i>NOTE! Manifold gas pressure must be measured and adjusted when all systems are running.</i> <input type="checkbox"/>	THE CLIENT HAS BEEN NOTIFIED OF COMPLETION OF COMMISSIONING & INSTRUCTED TO OPERATE THE SYSTEM AND HAS A COPY OF THE OWNERS MANUAL: <input type="checkbox"/> YES <input type="checkbox"/> NO
	ITEMS FOUND AT COMMISSIONING
	FIELD SERVICE REPORT CONCERNS: 1. Transportation damage <input type="checkbox"/> 2. Installation problem <input type="checkbox"/> 3. Unit not working <input type="checkbox"/> 4. Pipe-work substandard <input type="checkbox"/> 5. Electrical installed incorrectly <input type="checkbox"/> 6. Other <input type="checkbox"/>
	PREVENTATIVE MAINTENANCE 1. 12 months annual service required..... 2. Unit is not working after summer period..... 3. Accessibility: Ladder <input type="checkbox"/> Scissor lift <input type="checkbox"/> Boom lift <input type="checkbox"/>