**This Prefunctional Checklist should be completed as part of startup and initial checkout of the equipment in preparation for Functional Performance testing.**

|  |  |
| --- | --- |
| PC: | **26 24 16** |
| **ITEM:** | **Panelboards** |
| **ID:** | *(Use one form for each Equipment)* |
| **AREA SERVED:** | *(Building and Room Number / Name)* |

Form Filled Out By:

|  |  |  |
| --- | --- | --- |
|  | Name & Company | Date |
| GC |  |  |
| MC |  |  |
| EC |  |  |
| BC |  |  |
| CC |  |  |
| OR |  |  |
| A/E |  |  |
| CA |  |  |

GC = General Contractor; MC = Mechanical Contractor; EC = Electrical Contractor; BC = Balancing Contractor; CC = Controls Contractor; OR = Owner Representative; A/E = Architect/Engineer; CA = Commissioning Agent

XX = No Initials Required

# DOCUMENTATION VERIFICATION

Check if OK. Enter note number if deficient.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Item** | **GC** | **MC** | **EC** | **BC** | **CC** | **OR** | **A/E** | **CA** |
| Product information submitted |  |  |  |  |  |  |  |  |
| Shop drawings submitted |  |  |  |  |  |  |  |  |
| Manufacturer’s installation instructions submitted |  |  |  |  |  |  |  |  |
| O & M Manuals submitted |  |  |  |  |  |  |  |  |

# MODEL VERIFICATION

Fill in requested information.

|  |  |  |  |
| --- | --- | --- | --- |
|  | Installed | **Submitted** | **Specified** |
| Manufacturer |  |  |  |
| Model |  |  |  |
| Serial No. |  |  |  |

# INSTALLATION VERIFICATION

**This checklist does not take the place of the manufacturer’s recommended checkout and startup procedures or report.**

Check if OK. Enter Outstanding Item Note number if deficient.

| **No** | **Item** | **GC** | **MC** | **EC** | **CC** | **OR** | **A/E** | **CA** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 1 | Verify there is no physical damage to the panelboard |  |  |  |  |  |  |  |
| 2 | Verify the panelboard is the correct one for installation |  |  |  |  |  |  |  |
| 3 | Verify the cabinet is clean of all foreign materials. |  |  |  |  |  |  |  |
| 4 | Verify the panelboard is accessible. Sufficient access and working space should be available around the cabinet. The width of the working space in front of the panelboard should be at least 30 inches, or the width of the cabinet, whichever is greater. The working space should have adequate lighting and a minimum head room of 6 feet 6 inches. |  |  |  |  |  |  |  |
| 5 | Verify the panelboard will not be exposed to ambient temperatures above 104 F degrees, corrosive or explosive fumes, dust, vapors, dripping or standing water, abnormal vibration, mechanical shock, high humidity or unusual operating conditions |  |  |  |  |  |  |  |
| 6 | Verify the panelboard cabinet is securely mounted. |  |  |  |  |  |  |  |
| 7 | Verify the cabinet is securely grounded |  |  |  |  |  |  |  |
| 8 | Panelboard branch breaker layout is correct |  |  |  |  |  |  |  |
| 9 | Conduits are installed so as to prevent moisture or water from entering and accumulating within the enclosure. |  |  |  |  |  |  |  |
| 10 | Provisions have been provided to protect conductors from abrasion |  |  |  |  |  |  |  |
| 11 | Conductors are long enough to reach the terminal location in a manner that avoids strain on the terminal. |  |  |  |  |  |  |  |
| 12 | Conductor length is not excessive? Excessive conductor length will result in additional heating and may result in overheating |  |  |  |  |  |  |  |
| 13 | Verify circuit breaker or fuses are proper type, class, and rating |  |  |  |  |  |  |  |
| 14 | Verify all terminal connections are secure |  |  |  |  |  |  |  |
| 15 | Manually exercise all switches, circuit breakers, and other operating mechanisms to make certain they operate freely. |  |  |  |  |  |  |  |
| 16 | Make sure that the system is free from short circuits and ground faults; conduct an insulation resistance test phase to ground and phase to phase with the switches or circuit breakers in both the open and closed position. If the resistance reads less than 1 megohm while testing with the branch circuit devices in the open position, the system may be unsafe and should be investigated. |  |  |  |  |  |  |  |
| 17 | Verify the hinged cover or door opens a minimum of 90 degrees when installed. Make certain that no conductors are pinched and that all enclosure parts are properly aligned and tighten. |  |  |  |  |  |  |  |
| 18 | There should be no load on the panelboard when it is energized. Turn off all of the downstream loads. |  |  |  |  |  |  |  |

# OUTSTANDING ITEMS

Note outstanding items in table below. Use numbers referenced above.

|  |  |  |
| --- | --- | --- |
| Resolved (Initial / Date) | **Note** | Description |
|  | **1.** |  |
|  | **2.** |  |
|  | **3.** |  |
|  | **4.** |  |
|  | **5.** |  |
|  | **6.** |  |
|  | **7.** |  |
|  | **8.** |  |
|  | **9.** |  |
|  | **10.** |  |

# FIELD NOTES

Fill in as appropriate.

|  |
| --- |
|  |
|  |
|  |
|  |
|  |

# SIGN OFF

System / Equipment have been installed in accordance with the Contract Documents and are ready for Functional Testing.

|  |  |  |
| --- | --- | --- |
|  | **Signature** | **Date** |
| **Contractor’s Representative** |  |  |
| **A /E Representative** |  |  |
| **Commissioning Agent** |  |  |
| **Owner’s Representative** |  |  |

##### END OF CHECKLIST