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| --- |
| 1. ***All ITR documents to be completed & witnessed by competent person/s.***
2. ***Compliance to be achieved to contract requirements and all latest versions of applicable standards.***
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|  |
| **1. REFERENCE INFORMATION** |
| **INSPECTION DATA** | **ASSET DATA** |
| PROJECT NAME: | MANUFACTURER: |
| LOCATION: | MF SERIAL NO: |
| INSPECTION DATE: | WC FLER / TAG NO: |
| INSPECTOR NAME: | TYPE / MODEL NO / SIZE: |
| PROJECT / CONTRACT NO: | DESIGN CRITERIA:SPS 240 – Automatic Control Valves – Cast Iron Body |
| ATTENDEES: |

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| **2. INSPECTION PRELIMINARIES** | **YES** | **NO** | **N/A** | **COMMENTS / DETAILS** |
| 1 | “Punchlist” reviewed and free of significant defects preventing asset pre-commissioning? | [ ]  | [ ]  | [ ]  |  |

| **3. & 4. INSPECTION & TESTING** | **YES** | **NO** | **N/A** | **COMMENTS / DETAILS** |
| --- | --- | --- | --- | --- |
| 1 | Confirm u/s and d/s valve isolation can be achieved before commencement. | [ ]  | [ ]  | [ ]  |  |
| 2 | Is fluid at the required flow / pressure is present at the valve for commissioning purposes? | [ ]  | [ ]  | [ ]  |  |
| 3 | Determine the starting position of the valve (If not closed – close valve). | [ ]  | [ ]  | [ ]  |  |
| 4 | Is closed position indication correct and has valve seated correctly? | [ ]  | [ ]  | [ ]  |  |
| 5 | Does valve operate smoothly throughout valve range during opening? | [ ]  | [ ]  | [ ]  |  |
| 6 | Is open position indication correct? | [ ]  | [ ]  | [ ]  |  |
| 7 | Does valve operate smoothly throughout valve range during closure? | [ ]  | [ ]  | [ ]  |  |
| 8 | Is closed position indication correct and has valve seated correctly? | [ ]  | [ ]  | [ ]  |  |
| 9 | Repeat valve opening and confirm open position indication correct. | [ ]  | [ ]  | [ ]  |  |
| 10 | Valve returned to fully closed position? | [ ]  | [ ]  | [ ]  |  |
| ***SOLENOID PILOT SYSTEM (To be conducted in conjunction with electrical / instrumentation personnel)*** |
| 11 | Pilot system setup correctly to open & close valve (solenoids / needle valves, etc…)? | [ ]  | [ ]  | [ ]  |  |
| 12 | Valve closure time used to set up PLC valve control? | [ ]  | [ ]  | [ ]  |  |
| 13 | Transducer & valve open / close position aligned to PLC valve control? | [ ]  | [ ]  | [ ]  |  |

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| **5. REMARKS / REMEDIAL / FOLLOW UP ACTIONS** | **ACTION BY** | **TARGET DATE** | **STATUS** |
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| **6. SIGNOFFS** |
| NAME (PRINT) | COMPANY / ROLE | SIGNATURE | DATE |
| NAME (PRINT) | COMPANY / ROLE | SIGNATURE | DATE |
| NAME (PRINT) | COMPANY / ROLE | SIGNATURE | DATE |