| PROJECT:   |       |  |  | REF:   |    |     |
|--|-------|--|--|--------|----|-----|
| INSTRUCTION CONT. CHECK LIST                               |       |  |  | DATE:  |    |     |
| FAN STATIC CHECK SHEET                                     |       |  |  | SHEET: | of |     |
|  |       |  |  | ·!     |    |     |
| SYSTEM: DRAWING NO:  |       |  |  | T 1    |    |     |
| FAN REFERENCE  | E NO: |  |  | YES    | NO | N/A |
| Fan casing free of debris and remove transit bolts.        |       |  |  |        |    |     |
| 2. Fan impeller free from obstructions.                    |       |  |  |        |    |     |
| 3. Impeller free of damage/cracks and secure on shaft.     |       |  |  |        |    |     |
| Casing access covers secure and airtight.                  |       |  |  |        |    |     |
| 5. Motor holding down/adjusting bolts secure.              |       |  |  |        |    |     |
| 6. Guards secure.  |       |  |  |        |    |     |
| 7. Anti-vibration mountings in good condition and secure.  |       |  |  |        |    |     |
| 8. Flexible connections in good condition and secure.      |       |  |  |        |    |     |
| 9. Fan and motor pulleys fitted and correct in type.       |       |  |  |        |    |     |
| 10. Fan belts fitted and correct in type.                  |       |  |  |        |    |     |
| 11. Check pulley alignment and belt tension.               |       |  |  |        |    |     |
| 12. Check fan and motor bearings for lubrication.          |       |  |  |        |    |     |
| 13. Local isolation operational.                           |       |  |  |        |    |     |
| 14. Check motor name plate and compare with specification. |       |  |  |        |    |     |
| 15. Have electrical checks been made.                      |       |  |  |        |    |     |
| 16. Fan/motor rotation correct.                            |       |  |  |        |    |     |
| COMMENTS:  |       |  |  |        |    |     |
|  |       |  |  |        |    |     |
|  |       |  |  |        |    |     |
| Signature  |       |  |  |        |    |     |
| Print Name   |       |  |  |        |    |     |
| Date   |       |  |  |        |    |     |
| Witnessed  |       |  |  |        |    |     |

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