

INSTALLATION OF CAPACITOR BANK

| | |
|-------------------|---------------|
| Project: | IR No.: |
| Owner: | DB ID NO.: |
| Project Manager: | Building No.: |
| Consultant: | Level: |
| Main Contractor : | Date: |

| NO. | DESCRIPTION | CHECKED BY | | | |
|-----|--|------------|--|--|----------------|
| | | | | | <i>REMARKS</i> |
| 1 | Approved Material used (MIR). | | | | |
| 2 | Shop drawing and load schedule is approved. | | | | |
| 3 | Installation is done as per approved shopdrawing. | | | | |
| 4 | Location and distances to the walls is correct. | | | | |
| 5 | Ratings of equipment and its components are as per approved shop drawings and load schedule. | | | | |
| 6 | Wiring system is completely & correctly installed as per approved schematic diagram. | | | | |
| 7 | Wires and cables are properly and tightly terminated. | | | | |
| 8 | Cables are properly identified & supported. | | | | |
| 9 | Door interlocked is functional | | | | |
| 10 | Correct type and size of fittings are used. | | | | |
| 11 | Identification nameplate is provided to the equipment. | | | | |
| 12 | Capacitor bank & its components are free of damages & scratches. | | | | |
| 13 | Approved drawing & load schedule is provided in drawing pocket. | | | | |
| 14 | Capacitor Bank has clear accessibility for maintenace and operation. | | | | |

Remarks/Comments (if any):

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|----------------|--|--|--|--|
| COMPANY | | | | |
| Name | | | | |
| Signature | | | | |
| Date | | | | |