Recommended Installation Form

Date of Installation Make Serial	1	Model	 Customer Name Billing Address		
First Visit YES Project Manager _	NO		Phone	Fax	
Sold By Address			Servicer Name Address		
Phone			 Phone CFESA Installer #		

Note: It is the recipient's responsibility to report any concealed or non-concealed damage to freight Company

Does the equipment, shipping container or any accessories show signs of shipping damage?					
If so, describe damage					
Has a freight claim been filed?					
Has the unit been operated prior to checkout?					
Is unit located under the exhaust hood? If so, provide Make & Model					
Verify that the location does not have a negative air pressure situation. Make up air present?					
Verify there is no down draft present blowing into flue and/or bake chamber					
Is unit level?					
Is unit stacked? If so, was a stacking kit used and is it secured properly?					
Is the unit installed on legs or casters?If casters, is a restraining device installed properly?					
Type of energy supplied?					
Rating plate energy specified? Gas Elec Phase Steam Water					

Gas Equipment

Check gas connections and piping for leaks with soap test

Measure and record pressure entering unit, static	and flow	
What is the incoming pipe size?	How far away is the gas meter?	What is
the gas meter flow rate?		
Measure pressure at manifold with unit heating		
Was there a regulator installed before the unit?	Is there a separate shut-off?	
Check burner operation and adjust as necessary	Check pilots and bypass settings and adjust as	
necessary		

Electrical

Note: If supplied voltages are not +/- 10% of the rated voltage stop and consult the factory. Operation under these conditions may void the equipment warranty

Measure and record incoming voltage with unit off L	.1-N L2-N L3-N L1-L2 L2-L3
Measure and record amp draw L1 L2 _	L3
Are the incoming wires properly sized?	Does the unit have a separate grounding wire?
Does the unit have it's own electrical disconnect?	Is it properly sized?
Measure and record incoming voltage with unit on L1	1-N L2-N L3-N
L1-L2L2-L3L1-L3	





Place Service Agency Logo and Address Here

Steam	
Does the unit have a steam pressure regulator installed?	
Measure and record incoming steam pressure Static & Flow	what size is the supply
piping? Measure and record operating flow pressure Check for and repair an	w looks
measure and record operating now pressure Check for and repair an	
Water	
If water quality test is required, provide results; PH Hardness	
Tclor Fclor Is there a pressure reg. Installed? What is the incoming water temp	pressure?
Turbidity Reading Flush Interval Time Flush Duration Time	TransMembrane
Pressure	
What is the size of the drain piping? How long is the drain run?	# of elbows?
How far is the unit located from the nearest floor drain? Is the unit installed	over a floor drain?
Check all gauges, timers valves and switches for proper operation	
Proper temperatures achieved?	
Check any motors for proper operation and calibrate if necessary Check thermostat operations and calibrate if necessary	
Verify all fitting parts operate normally; doors, gaskets and racks	
verify all fitting parts operate normally, doors, gaskets and racks	
Is kitchen manager present? How many kitchen staff are present?	
Operating instruction manual given to owner/operator? Managers Name	
Service agency sticker placed on unit with contact #	
Customer has been informed of preventative maintenance requirements?	Preventative Maintenance
offered?	-
Test with customer's product performed? Results satisfactory?	
If not, explain	
Warranty terms have been explained?	
Customer's Approval	
Technician	
Date	
Additional Comments:	





