

Prefunctional Checklist

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

PC:	11160
ITEM:	Loading Dock Equipment (Commissioning Agent shall customize this generic checklist for each piece of equipment included in the commissioning work scope)
ID:	
AREA SERVED:	

Form Filled Out By:

	Name & Company	Date
GC		
FS		
EC		
MC		
OR		
A/E		
CA		

GC = General Contractor; FS = Food Contractor; EC = Electrical Contractor; BC = Balancing Contractor; OR = Owner Representative; A/E = Architect/Engineer; CA = Commissioning Agent; MC = Mechanical Contractor
XX = No Initials Required

1. DOCUMENTATION VERIFICATION

Check if OK. Enter note number if deficient.

Item	GC	FS	EC	MC	CC	OR	A/E	CA
Product information submitted	XX		XX	XX	XX			
Shop drawings submitted	XX		XX	XX	XX			
Manufacturer's installation instructions submitted	XX		XX	XX	XX			
Manufacturer's startup instructions submitted	XX		XX	XX	XX			
O & M Manuals submitted	XX		XX	XX	XX			
Factory test report submitted if applicable	XX		XX	XX	XX			
Manufacturer's representative start-up and check out complete and report submitted.	XX		XX	XX	XX			

June 2006

<insert project name and location>

2. MODEL VERIFICATION

Fill in requested information.

	Installed	Submitted	Specified
Manufacturer			
Model			
Serial No.			

3. 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.

Item	GC	FS	EC	MC	CC	OR	A/E	CA
Dock Leveler								
Vertical travel verified		XX	XX	XX	XX			
Automatic vertical compensation verified		XX	XX	XX	XX			
Automatic lateral compensation verified		XX	XX	XX	XX			
Lip operation verified		XX	XX	XX	XX			
Automatic ramp return verified		XX	XX	XX	XX			
Rated capacity verified		XX	XX	XX	XX			
Verify safety devices installed and functional		XX	XX	XX	XX			
Automatic Truck Restraint								
Same manufacturer as dock leveler verified		XX	XX	XX	XX			
Touch Pad run time verified		XX	XX	XX	XX			
Verify UL Listed		XX	XX	XX	XX			
Verify operating characteristics		XX	XX	XX	XX			
Dock Seals								
Verify fabric weight per square yard		XX	XX	XX	XX			
Verify guide strip width and color		XX	XX	XX	XX			
Verify dock seals when truck is positioned against dock bumper.		XX	XX	XX	XX			

June 2006

<insert project name and location>

PRE-FUNCTIONAL CHECKLIST – LOADING DOCK EQUIPMENT

PC 11160 - 2

4. 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.	

5. FIELD NOTES

Fill in as appropriate.

6. SIGN OFF

System / Equipment has been installed in accordance with the contract documents and is ready for Functional Testing.

	Signature	Date
Contractor's Representative		
A /E Representative		
Commissioning Agent		
Owner's Representative		

END OF CHECKLIST

June 2006

<insert project name and location>