

# **ISIMET WARRANTY START-UP CHECKLIST**

VERIFY THAT ALL CHECKLIST AND START UP PROCEDURES PER OPERATION AND MAINTENANCE MANUAL HAVE BEEN PERFORMED AND THAT ALL INSTRUCTIONS PER SUPPLEMENTAL INSTALLATION INSTRUCTIONS HAVE BEEN FOLLOWED. FAILURE TO DO SO MAY VOID THE WARRANTY.

The signing of this document certifies that the Installer has installed all components of the Utility Control System per the manufacturer's recommended installation procedures.

Note: For a single *ISIMET* Utility Control System, complete this form as well as the Warranty Registration form. Where more than one *ISIMET* Utility Control System is provided for a single facility, then this form may be completed and submitted, combining all tested systems and components providing that;

- 1) A Multi-System Warranty Registration form is completed listing all components and systems. (Copies may be made where needed)
- 2) All products and components for the system(s) are/(were) were placed into service at a single time. (Where separate start-up is performed for independent systems within a facility then a separate Checklist and Registration should be completed for each set of system start-ups.)

## **Pre Start-Up Checklist**

- **Before activating utility services and placing the Utility Control System(s) into operation, complete all checklists and tests for all products per manufacturer's instructions.**
- **Verify that ALL installation procedures and Line Voltage, EMS, Alarm, Remote Relays, and/or Solenoids conform to Equipment Specifications. Verify the wiring isolation conditions have been met per product specifications and supplemental wiring instructions.**
- **Do not proceed with equipment start-up until all Start-Up Tests & Checklists have been completed.**
- **If the system is integrated with other automation systems, such as "ems" and alarm, verify that input signals from those systems perform intended functions as stated in the installation instructions and that alarm and/or panic notification signals from this system(s) are acknowledged correctly by those other systems.**

The following tests and operating conditions are certified as being performed and successfully completed for all products provided for this system(s).

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Line voltage wiring                         | <input type="checkbox"/> Integrated control wiring        | <input type="checkbox"/> Low voltage control wiring |
| <input type="checkbox"/> Solenoid operators                          | <input type="checkbox"/> Electrical operators             | <input type="checkbox"/> Exhaust Fan Circuit        |
| <input type="checkbox"/> Facility's Utility Systems Operational Test | <input type="checkbox"/> All Systems and Components tests |   |

Where applicable:

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> "ems" Integration test | <input type="checkbox"/> "alarm" Integration test | <input type="checkbox"/> Remote timing unit        |
| <input type="checkbox"/> Input Monitoring units | <input type="checkbox"/> Output Monitoring units  | <input type="checkbox"/> Companioned LA Controller |

Project \_\_\_\_\_  
(full name & address)

Purchaser

Installer, if different from purchaser.

\_\_\_\_\_  
Company

\_\_\_\_\_  
Company

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

Please mail or fax all forms to:

**ISIMET, LLC**  
P.O. Box 129  
Naples, TX 75568

Fax: (903) 897-0740

Issue Date January 2005

If Solenoids or Electrical Contacts other than provided by *ISIMET* are used in the application, Compliance Certification forms must also be completed and submitted with this document before Warranty can be issued for the Product.

**ISIMET**

PO Box 129  
Naples, TX 75568-0129  
Phone: (903) 897-0737  
Fax: (903) 897-0740

Date: \_\_\_\_\_

Phone # \_\_\_\_\_

Fax # \_\_\_\_\_

**VERIFICATION OF INSTALLATION PRIOR TO FACTORY SERVICE**

Project Name: \_\_\_\_\_ Project # \_\_\_\_\_

Project Location: \_\_\_\_\_

Product \_\_\_\_\_ Model # \_\_\_\_\_ Serial # \_\_\_\_\_

Nature of the problem \_\_\_\_\_

**Installation Procedure Compliance**

Wiring: 120-vac Line Wiring / 24-vac Output Wiring / Remote Panic Wiring / Integrate Service / Monitoring

**Devices**

Are any of these wiring systems located within any common conduit? YES \_\_\_\_\_ NO \_\_\_\_\_

Are any of these wiring systems bundled or tied together with other wiring? YES \_\_\_\_\_ NO \_\_\_\_\_

Have all output circuits been testing for direct short? YES \_\_\_\_\_ NO \_\_\_\_\_

Are all fuses functional? YES \_\_\_\_\_ NO \_\_\_\_\_

**Transient Voltage Test:** (Must use a digital voltage meter)

With the Unit's red Control Switch OFF @ the panel and power on to all appliances and outlets within the immediate area of the system and field wiring connected at the output terminals including COM, testing @ Terminal 2 on the Unit's Panel does transient voltage appear across:

Pins 1 & COM YES \_\_\_\_\_ NO \_\_\_\_\_ voltage reading \_\_\_\_\_

Pins 2 & COM YES \_\_\_\_\_ NO \_\_\_\_\_ voltage reading \_\_\_\_\_

Pins 3 & COM YES \_\_\_\_\_ NO \_\_\_\_\_ voltage reading \_\_\_\_\_

**Integrated wiring verification:** (See image to right)

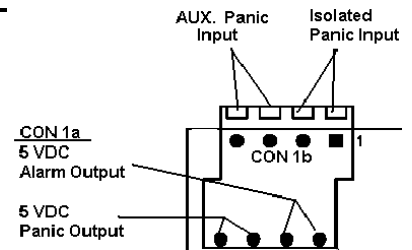
If other devices are connected to the unit, they are terminated according to manufacturer's instructions as follows:

Remote Panic: Terminated @ pcb @ "AUX. Panic Input" \_\_\_\_\_

24-vac "other" Panic: Terminated @ pcb @ Isolated Panic Input \_\_\_\_\_

No other wiring conducting voltage is connected to any pin on the pcb. \_\_\_\_\_

Integrated services ("ems" & Alarm) are correctly terminated on the Panel. \_\_\_\_\_



Failure to inform the Company of conditions that causes the unit to fail that are created by improper installation methods will be cause for charges for costs of repairs or services being assessed against the purchaser / installer of the unit.

Company Authorizing Service \_\_\_\_\_ Date \_\_\_\_\_

Authorized Signature \_\_\_\_\_

**Please fax report to (903) 897-0740**