

Desired start date		Installer representative on site		Intervention reports receiver	
ETT project no.:		Full name:		Full name:	
Date:		Email* : * Mandatory for documents dispatch		Email* : * Mandatory for documents dispatch	
Time:		Mobile:		Mobile:	
Exact site address:		Site Street no.: Street name: Postal/Zip code: City: Country:			
Type of access:		<input type="checkbox"/> Ground level <input type="checkbox"/> Stairs <input type="checkbox"/> Installer's boom lift & operator <input type="checkbox"/> Safety cage <input type="checkbox"/> Other:			
Units serial no. and type:					

* Mandatory for documents dispatch

INSTALLATION CONDITIONS - TO BE CONFIRMED BEFORE COMMISSIONING	n.a.	Yes	No
ETT personnel can safely access the unit throughout the intervention.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Crankcase heaters have been activated 12 hours before commissioning. (excluding ULTIMA not equipped with SRV - Variable Cooling System)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hydraulic connections have been made, pressure tests and purges have been performed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Water filters have been installed (for units on water loop).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gas connections have been made, pressure tests and purges have been performed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fresh and exhaust air cowls and sealing gaskets have been installed according to our recommendations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Air filters have been installed on all units.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Air duct connections have been made for air flow rate adjustment.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Probes, buses and displays have been connected according to our wiring diagrams and recommendations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Buses for BMS have been installed according to our wiring diagrams (if applicable).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
An additional bus has been installed on each unit according to our wiring diagrams for computer connection to the controller (if the unit is controlled by ACTION FROID).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ethernet connecting cables for remote supervision have been installed on each unit according to our wiring diagrams.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A telephone line has been connected.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No fire drill is planned on the day of the intervention (to avoid sudden power failures).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<p>✓ Commissioning shall be performed in a single intervention. Any additional intervention resulting from failure to observe the above mentioned conditions will be invoiced.</p> <p>✓ The guarantee will be considered void if the equipment is operated before commissioning.</p>					
I understand that my presence or representation is necessary throughout the commissioning intervention and that otherwise ETT will not be able to validate peripheral equipment commissioning (flow rate adjustment, control settings, power switch connection, etc.) and will therefore have to express reserves.	<input type="checkbox"/> YES				
I understand and agree to the guarantee clauses for ETT units.	<input type="checkbox"/> YES				
I understand and agree to the prerequisites for commissioning.	<input type="checkbox"/> YES				
For the installer	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">Date:</td> <td rowspan="3" style="text-align: center; vertical-align: middle;"> <i>Stamp and signature preceded by the words "Read and approved"</i> </td> </tr> <tr> <td>Full name:</td> </tr> <tr> <td>Company:</td> </tr> </table>	Date:	<i>Stamp and signature preceded by the words "Read and approved"</i>	Full name:	Company:
Date:	<i>Stamp and signature preceded by the words "Read and approved"</i>				
Full name:					
Company:					

RESERVED FOR ETT SERVICES	Decision <input type="checkbox"/> Approved <input type="checkbox"/> Postponed	Date:	Time:
ETT Services technician	Full name:	Title:	
ETT Services contact person	Full name:	Email:	

Reference : MARK-FIC_21-EN_Export_D