



START-UP SHEET Air Compressor

Job Name _____

Job Number _____

Job Address _____

Section 5: Equipment Description

Spec. #:	Submittal #:	P&ID / Dwg #:
Area Served:		

Air Compressor Data	Design	Actual On Site
Unit Tag #		
Manufacturer		
Model #		
Serial #		

Air Dryer Data	Design	Actual On Site
Unit Tag #		
Manufacturer		
Model #		
Serial #		

Belt Description			
Size & Quantity			

Section 6: Equipment Pre-Installation Inspection

Step	Inspection Description	Yes	No	N/A	Performed By (Initials & Date)
6.2	Nameplate data matches vendor specifications.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**Comments/
Observations** _____

**Performed By
(Therma)**

**Reviewed By
(Owner/Representatives)**

Print Name	Signature	Date



START-UP SHEET Air Compressor

Step	Inspection Description	Yes	No	N/A	Performed By (Initials & Date)
6.3	All parts are received.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6.4	No visible signs of damage, leak, or defective parts.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6.5	Verify electrical service for correct voltage, current and thermal overload protection.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6.6	Operational and Maintenance (O&M) manual is available in field.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6.7	Start-up technicians have reviewed factory start-up procedures in O&M manual.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Section 7: Installation Inspection

ID	Inspection Description	Yes	No	N/A	Performed By (Initials & Date)
7.2	Unit is installed level and is covered or out of weather.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7.3	Tag # is attached to the unit.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7.4	Service clearance is adequate for maintenance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7.5	Compressor pump is lubricated.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7.6	Drive belt tension is correct.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7.7	Pulleys are aligned and tight.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7.8	Air inlet, oil filters, and discharge filters are installed properly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7.9	Compressor oil level is within manufacturer's specification.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7.10	Guard is secure.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Comments/
Observations _____

**Performed By
(Therma)**

**Reviewed By
(Owner/Representatives)**

Print Name	Signature	Date



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Step	Inspection Description	Yes	No	N/A	Performed By (Initials & Date)
7.11	Auto drains are installed on tank and run to sanitary or condensate separator.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7.12	All wiring connections are tight.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7.13	Drain is piped properly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7.14	Air dryer is installed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7.15	Oil separator is installed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7.16	Oil separator drain is run to condensate management system.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7.17	Condensate management system is installed for oil separation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Section 8: Operational Inspection

ID	Inspection Description	Yes	No	N/A	Performed By (Initials & Date)
8.2	Unit vibration is acceptable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8.3	Motor rotation is correct.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8.4	Air dryer is functional.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8.5	Oil separator is functional.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8.6	Record the operating parameters below:				

Comments/
Observations

Performed By
(Therma)

Reviewed By
(Owner/Representatives)

Print Name	Signature	Date



START-UP SHEET Air Compressor

Record Start Up Operating Parameters

Data	Design	Actual On Site		
Unit Voltage				
Current				
Phase				
Motor Rotation (RPM)				
Horsepower (HP)				
Air Dryer Voltage				
Current				
Phase				
$\Delta T^{\circ}F$				

End of Section

Comments/
Observations

**Performed By
(Therma)**

**Reviewed By
(Owner/Representatives)**

Print Name	Signature	Date