



START-UP SHEET Vacuum Pump

Job Name _____ **Job Number** _____

Job Address _____

Section 5: Equipment Description

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

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

Data	Design	Actual On Site
Motor Manufacturer		
Model #		
Serial #		
RPM		
Horsepower (HP)		
Service Factor		

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"/>	
6.3	All parts are received.	<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)
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

Step	Inspection Description	Yes	No	N/A	Performed By (Initials & Date)
7.2	Unit is installed level.	<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	Unit base filled with concrete.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7.5	Service clearance is adequate for maintenance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7.6	Spring isolators are installed and adjusted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7.7	Pressure gauge is installed per design.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7.8	Inlet and outlet valves are installed properly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7.9	Exhaust devices are connected per design.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7.10	Water piping is installed per manufacturer's specification. (for wet sealed pumps)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7.11	Pump is lubricated.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7.12	Pump oil level is at manufacturer's specification.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7.13	Back pressure gauge is installed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7.14	Gas ballast valve is installed.	<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)
7.15	Oil control is properly installed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7.16	Oil filter is installed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7.17	Oil drains are installed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7.18	Piping connections are tight.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7.19	Clamps, bolts, and setscrews are tight.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7.20	Electrical connections are secure.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7.21	Connection between the unit and piping are installed per good piping practices.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Section 8: Operational Inspection

Step	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	Pump rotation is correct.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8.4	Coupling assemblies need alignment (If yes, proceed to step 5, otherwise go to step 6.).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8.5	Record final data:				
	<u>Position</u>	<u>Readings</u>			
	Up/Down				
	Side/Side				
	Angular				
8.6	Oil or water level is within manufacturer's specifications.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8.7	Oil or water temperature is within manufacturer's specification.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Comments/
Observations

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Step	Inspection Description	Yes	No	N/A	Performed By (Initials & Date)
8.8	Record the operating parameters below:				

Record Start Up Operating Parameters

Data	Design	Actual On Site		
Unit Voltage				
Current				
Phase				
Vacuum Pressure				
Impeller diameter				

Data	Design	Actual On Site		
Unit Voltage				
Current				
Phase				
Vacuum Pressure				
Impeller diameter				

END OF SECTION

Comments/
Observations

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(Therma)

Reviewed By
(Owner/Representatives)

Print Name	Signature	Date