ENVIRONMENT | ONE START UP SHEET

	ADDRESS:	
DATE:		
INSPECTOR:	SN:	TYPE/SIZE:
ENVIRONMENT | ONE INSPECTOR:		

YES OK	START-UP CHECK LIST	Type of problem found and action taken. *Write in note section if need more space.*	Date resolved
	Does the unit appear to be damage free and properly installed?		
	Any visible problems with panel? (Properly installed, wired and damage free)		
	Is station installed at proper height?		
	Does the unit pass the continuity test?		
	Is this going to be started by house or generator power?		
	Turn on alarm circuit breaker		
	Does alarm operate properly?		
	Turn on pump circuit breaker	check amperage on white lead to motor	
	Volt Amps		
MIN-MAX	**(220-260) (5.0-8.0)**		
	Did the alarm and pump shut off properly?		
	After pump automatically shuts off, operate push to run.		

START-UP NOTES:

Location note:

SIGN-OFF: This pump is ready for gravity tie-in:

This pump has been approved by Environment | One: Date:

Gravity tie-in was made on: Water meter reading:

Date:

BS/ISSUE01/JAN02

GRINDER PUMP SERVICE RECORD

Address

Special unit or location:

Special Note:

DATE	TECHNICIAN	SERIAL#	DESCRIBE PROBLEM AND SERVICE PERFORMED