

WMS Sales

9580 County Road
Clarence Center, NY 14032
Ph: 716.741.9575
Fax: 716.741.4810

Grundfos BoosterpaQ

Grundfos BoosterpaQ Pre-Start-up Checklist

The boxes are required to be filled in completely. Other information would be recommended to complete the start-up procedure.

Job Name: _____
Location: _____
Distributor: _____
Contact: _____
Contractor: _____
Contact: _____
Phone #: _____

The following info is on the pump/system nameplates:
System Serial #: _____
System ID #: _____
System Model #: _____
Pump Model #: _____
Pump 1 Serial #: _____
Pump 2 Serial #: _____
Pump 3 Serial #: _____

	Yes	No
1. Water Connections		
All water connections are made and tested?	<input type="checkbox"/>	<input type="checkbox"/>
Inlet Gauge Reads _____ psi		
Can we create system demand to run pumps? (External hose bib, faucets, flush valves...)	<input type="checkbox"/>	<input type="checkbox"/>
2. Expansion Tank		
Tank is installed with a shut-off valve and drain and on the discharge side of the pump? (See installation instructions for procedure)	<input type="checkbox"/>	<input type="checkbox"/>
Tank was pre-charged to .70 of system pressure? (System Design Pressure _____ psi x .70 = _____ psi tank pre-charge)	<input type="checkbox"/>	<input type="checkbox"/>
3. Electrical Connections		
All electrical connections are made and tested?	<input type="checkbox"/>	<input type="checkbox"/>
Voltmeter Reading: _____		
Are any electrical connections temporary? If yes please explain:	<input type="checkbox"/>	<input type="checkbox"/>
4. Is the Building Management System (BMS) connected?	<input type="checkbox"/>	<input type="checkbox"/>
Will controls contractor be on sight for startup?	<input type="checkbox"/>	<input type="checkbox"/>

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Please complete the above information, sign and return to Steve Young, Emily DeTine or Bryan Schaefer at edetine@wmssales.com prior to scheduling a start-up. Incomplete or false information that prevents a scheduled start-up from being completed would result in additional charges.

Contractor: _____ **Date:** _____

Your start-up has been scheduled for _____ **at** _____ **AM PM**