



UNIVERSITY OF NOTRE DAME UTILITIES & MAINTENANCE DEPARTMENT

VFD START-UP REQUEST FORM

In order to ensure successful and comprehensive start-ups of VFD's the following form must be completed and returned to the University of Notre Dame Utilities & Maintenance Department in order to initiate scheduling of the performance testing, commissioning and to place in force the product warranty. From the receipt of this form by the Notre Dame Utilities & Maintenance Department (Tom Noble tnoble2@nd.edu) a start-up date will be scheduled within a maximum of two (2) weeks. Also, a completed VFD checklist must be submitted prior to start-up.

Failure to provide this completed request may result in project schedule delays. Units are NOT to be energized prior to start-up or the warranty may be null and void. Failure to properly complete this form and follow the VFD Check list may result in damage to equipment, systems, personal injuries (including death) and property damage. The contractor hereby knowingly and voluntarily assumes all risk of injury, property damage and liability for any and all costs associated with any service interruption and restoration, as well as for any claims, demands, actions, causes of actions, damages or judgments arising out of personal injuries or property damage resulting from the equipment use.

Party Requesting Start-up:

Company Name:
Contact Person:
Telephone No.:
Date of Request:

Project Information:

Project Name:
Project Location:

Requested Start-up Information:

Type of Start-up: Permanent Temporary
Date after which equipment will be ready to perform start-up:

Equipment Information:

List VFD's separately using designations as given on project documents.

Table with 8 columns: Designation, Type, HP, Voltage, Designation, Type, HP, Voltage

Contractor Sign-off:

We the following contractors do certify that all work will be complete by the requested start-up date for the above mentioned VFD's. Such work shall include all necessary electrical work, mechanical piping, ductwork, filters, controls, fan/pump equipment etc. that is necessary to fully test and operate the aforementioned VFD's. Complete the attached checklist. Note: If VFD's are to be operated during the construction phase of a project, it shall be the responsibility of the mechanical contractor to install and maintain temporary filter media over the enclosure openings to prevent construction dirt from entering the cabinet. This media shall be approved by UND Building Systems prior to its use. This filter material must be removed by the mechanical contractor after substantial completion.

Further, we represent and warrant that we understand how to operate the VFD's and the entire system in its current condition that the VFD is a component thereof.

Construction Manager:
General Contractor:
Electrical Contractor:
Mechanical Contractor:
Sheetmetal Contractor:
Temperature Control Contr.:

VFD Start-up Schedule Information: (Completed by UND Utilities)

Scheduled Start-Up Date:
Number of Days Scheduled On Site:

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**VFD CHECK LIST**

Project: \_\_\_\_\_ Date: \_\_\_\_\_

System: \_\_\_\_\_ Designation: \_\_\_\_\_

VFD: HP Rating \_\_\_\_\_ Voltage: \_\_\_\_\_

Motor: HP Rating \_\_\_\_\_ Voltage: \_\_\_\_\_

VFD Application: Fan: \_\_\_\_\_ Pump: \_\_\_\_\_ Other: \_\_\_\_\_

Fan systems:

- Blocking removed (free-spin): \_\_\_\_\_
- Motor rotation correct: \_\_\_\_\_
- Dampers in open position: \_\_\_\_\_
- Permissive safeties wired (smoke, freeze, static): \_\_\_\_\_
- Automatic controls operational: \_\_\_\_\_
- Ductwork Filters installed: \_\_\_\_\_
- Cabinet cleaned: \_\_\_\_\_
- Amps and vibration at 60Hz: \_\_\_\_\_

Pump systems:

- System filled/primed: \_\_\_\_\_
- Motor rotation correct: \_\_\_\_\_
- Valves in open position: \_\_\_\_\_
- Automatic controls operational: \_\_\_\_\_
- Strainers installed: \_\_\_\_\_
- Amps and vibration at 60Hz: \_\_\_\_\_

VFD Enclosure:

- Enclosure cleaned: \_\_\_\_\_
- Temporary filter installed on enclosure: \_\_\_\_\_

Other systems:

- Provided Description of application and use: \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

Contractor: \_\_\_\_\_

Representative: \_\_\_\_\_

Contact Information: \_\_\_\_\_