IWP ELECTRICAL / INSTRUMENT CABLE INSTALLATION CHECKLIST

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|  | | MAJOR PROJECTS |
| **Appendix - 11** |
| **Department:** | CONSTRUCTION | Number: **PCM-CP-000X-11** |
| **Subject:** | IWP ELECTRICAL / INSTRUMENT CABLE INSTALLATION CHECKLIST | Revision:  **A** |

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| **IWP ID Number:** | | **Date Prepared:** | |
| **IWP Description:** | | | |
| **ITEM DESCRIPTION** | **YES / NO / N/A** | | **COMMENTS** |
| Cable Tray Installed And Sign-Off Ready For Use |  | |  |
| Cable Size, Quantity And Installation Materials  Onsite And Available For Installation |  | |  |
| Cable Puller Onsite And Available For Use |  | |  |
| **Crane(s) To Support Work Package Activities:**  a) Available  b) Scheduled |  | |  |
| Required Rigging And Accessories Onsite And Available To Support Work Package Activities |  | |  |
| **Transportation Requirements For Materials And Tools Etc.:**  a) Available  b) Scheduled |  | |  |
| Material Requisitions Complete Ready To Be Submitted For Work Package |  | |  |
| Materials In Warehouse Bagged And Tagged |  | |  |
| **Special Training / Qualification Requirements:**  a) Safety; SCABA, High Level Rescue Etc  b) Equipment Operation; Manlift Etc.  c) Other  d) Training Complete |  | |  |
| Permit Requests Complete Ready To Be Submitted For Work Package |  | |  |
| Safety Items And Concerns Clearly Identified,  Listed And Addressed |  | |  |
| **Hazard Assessments / Requirements:**  a) Hazard Identified  b) Assessment Performed  c) Mitigated |  | |  |
| Additional Personnel Protection Equipment Requirements Clearly Identified, Listed, Onsite And Available For Use |  | |  |
| Inspection And Testing Requirements Clearly Identified And Listed Including Hold And Witness Points |  | |  |
| Code Requirements Clearly Identified And Listed |  | |  |
| QC forms inserted into package for required inspection and sign-off |  | |  |
| **Third Party Inspection And Testing:**  a) Available  b) Scheduled |  | |  |
| **Vendor Requirements:**  a) Required  b) Available  c) Scheduled |  | |  |
| **Scaffolding / Manlift Requirements:**  a) Identified  b) Available  c) Scheduled  d) Built (Scaffold Only) |  | |  |
| **All Required Drawings, Details And Specifications Included In Work Package:**  a) Electrical / Instrumentation General Arrangements  b) Single Line Drawings  c) Cable Installation Details  d) Cable Termination Schedule  e) Specifications:  - Electrical  - Instrumentation  f) Special Requirements  g) Design Change Notices  h) Request For Information  i) Inspection And Test Plan  j) Lessons Learned Suggestion Form |  | |  |
| **As-Builts:**  a) Installed As Per Drawings And Specifications  b) Changes Or Modifications Made  c) Changes Or Modifications Recorded And Included on Master As-Builts Drawing Set |  | |  |
| Cable Installed, Inspected And Signed-Off As Complete |  | |  |
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| **Planner Name (print):** | **Planner Signature:** | **Issue Date:** |
| **Superintendent Name (Print):** | **Superintendent Signature:** | **Issue Date:** |
| **Work Foreman Name:** | **Work Foreman Signature:** | **Work Start Date:** |
| **Work Foreman Name:** | **Work Foreman Signature:** | **Work Completion Date:** |