



CONTROLS READINESS STATEMENT

ISG

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The requirements for TAB work to begin are items 1-4 listed below:

The requirements for controls commissioning to begin are all 7 items listed below:

Items 1 & 2 are commonly referred to as “point-to-point”.

1. All HVAC equipment and related controls have been verified as installed and/or connected.
2. All standalone and computer based equipment and related controls have been tested for connection and operation.
3. All DDC control software is **INSTALLED, PROGRAMMED** and **TESTED** for proper control sequence operation.
4. All DDC front end computer graphics are **PROGRAMMED, TESTED**, and in automatic ('hands-off') operation.
5. All equipment intended for time schedule based or interlocked operation is programmed to run accordingly and has been verified. Specifically, all equipment is in automatic operation, not in HAND or any other manual override.
6. Required DDC system access (password, rights, etc.) is available.
7. All DDC controlled equipment is configured for proper display interpretation and testability.
 - a. Actuators are shown with 0%=no flow/heat/cool/bypass/speed/etc.; 100%=full flow/heat/cool/face/speed/etc.
 - b. All operating functions are easily operator overridable to facilitate testability including but not limited to setpoints, sensors, and actuators.
 - c. All control sequences have their related setpoint, sensor, and resultant action on the screen and in a useful proximity to each other.
 - d. All alarm limits, if used, are programmed to appropriate values for normal use and to minimize false alarms.
 - e. Motor statuses should be configured and set to indicate actual belt/coupler break conditions.
 - f. If text and graphic formats are available on the EMS computer front end both operator display options are equally complete and accurately matched for displaying the above items.

Exceptions to the above readiness for commissioning are listed and described below.

[illegible]

Signature affirms that the above items are, to the best of my knowledge, true and ready to be verified by the commissioning agent.

Project Site:

Controls Technician:

Phone Number:

Controls Company:	_____
Date:	_____

Please return completed form to ISG PM and Commissioning Agent via the contact methods above