

# START-UP CHECKLIST

Date      /      /     

Address                                     

Phone (    ) -                     

Permit#                     

## Tank

Size/GPD                     

YES

NO

- Tank location as designed
- Solid earthen pad
- Tank sealed properly
- Tank level
- Inlet and outlet sealed
- Tank backfilled
- Has BAT® media shifted
- Is media secured properly
- Inlet tee installed
- Outlet tee installed
- Transfer tee installed
- Flow line correct
- Vent cap in place
- Sample ports installed
- Flow through tank



## Control Panel

Model#                     

S/N#                     

- Dedicated circuit
- Wired according to NEC
- Telemetry functional
- Alarms functional
- Switch functional
- Panel breaker functional
- Proper labels attached



## UV Disinfection (If Applicable)

S/N#                     

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## Pump Tank (If Applicable)

S/N#                     

- Pump interlock functional
- High water alarm functional
- Proper flow to tank



## Aerator

Model#                     

S/N#                     

YES

NO

- Power off
- Watertight connector installed properly
- Shaft and foam restrictor installed
- Brackets fitted
- Vent hose installed
- Vent hose seated in vent cap
- Perform control panel electrical test
- Aerator vibration acceptable
- Air volume acceptable
- Owners manual to homeowner



## Chlorinator (If Applicable)

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## De-Chlorinator (If Applicable)

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Designer/Engineer                                     

Installer                                     

Service Provider                                     

Distributor