

Ranor, Inc.

Ranor Test Sheet

Rooms
(310-318)

PROJECT: 667 COWGROSS

DATE: 12-9-16

TIME OF DAY: 1:00 PM

CITY OR TOWN: PORTLAND

SYSTEM TESTED

DRAIN, WASTE, VENT

DOMESTIC HOT & COLD WATER

LP/NATURAL GAS

HYDRONIC HOT WATER

NITROUS OXIDE

STEAM

VACUUM

CONDENSATE

MED AIR

CHILLED WATER

OXYGEN MEDICAL

OTHER (EXPLAIN)

TEST MEDIUM USED

COLD WATER

INERT GAS

AIR

Mechanic's Test Awareness Verification

Name	Date	Time
<i>[Signature]</i>	12-9	1:00
<i>[Signature]</i>	12-9	1:00
<i>[Signature]</i>	12-9	1:00
<i>[Signature]</i>	12-9	1:00
<i>[Signature]</i>	12-9	1:00
<i>[Signature]</i>	12-9	1:00
<i>[Signature]</i>	12-9	1:00
<i>[Signature]</i>	12-9	1:00
<i>[Signature]</i>	12-9	1:00
<i>[Signature]</i>	12-9	1:00
<i>[Signature]</i>	12-9	1:00

TEST PRESSURE: 5 PSI

START TIME: 12/9/16 8:00 AM

END TIME: 2:00 PM

DURATION: 6 HRS

TEST PERFORMED BY: *[Signature]*

RANOR FOREMAN

TEST INSPECTED BY: *[Signature]*

CODE ENFORC OFFICER

WITNESSED BY: *[Signature]*

G C SUPERINTENDENT

WITNESSED BY: _____

OWNER PROJECT MANAGER

Ranor, Inc.

Ranor Test Sheet

PROJECT: 667 Congress St

DATE: 12/16/16

TIME OF DAY: 7:00 AM

CITY OR TOWN: Portland

(Rooms 303-304-305-306
307-308-309)

SYSTEM TESTED

DRAIN, WASTE, VENT

DOMESTIC HOT & COLD WATER

LP/NATURAL GAS

HYDRONIC HOT WATER

NITROUS OXIDE

STEAM

VACUUM

CONDENSATE

MED AIR

CHILLED WATER

OXYGEN MEDICAL

OTHER (EXPLAIN) _____

TEST MEDIUM USED

COLD WATER

INERT GAS

AIR

Mechanic's Test Awareness Verification

Name	Date	Time
<i>[Signature]</i>	12-16	7:00
<i>[Signature]</i>	12-16	7:00
<i>[Signature]</i>	12-16	7:00
Joe Gerowans	12-16	7:00
John Valiani	12-16	7:00
<i>[Signature]</i>	12-16	7:00
<i>[Signature]</i>	12-16	7:00
Joe Gerowans	12-16	7:00
Chris Keenan	12-16	7:00
Idem Perella	12-16	7:00
Sam [unclear]	12-16	7:00

TEST PRESSURE: 5 PSI
START TIME: 2:00 PM 12/15/16
END TIME: 3:30 PM 12/16/16
DURATION: 1 1/2 HRS

TEST PERFORMED BY: *[Signature]*
RANOR FOREMAN

TEST INSPECTED BY: *[Signature]*
CODE ENFORC OFFICER

WITNESSED BY: *[Signature]*
G C SUPERINTENDENT

WITNESSED BY: _____
OWNER PROJECT MANAGER