**COMPLETE AND INCORPORATE THIS FORM INTO THE PLANS**

 Project Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Permit Number: \_\_\_\_\_\_\_\_ - \_\_\_\_\_\_\_\_ - \_\_\_\_\_\_\_\_

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| **ITEM #** | **Commissioning Measures Items** |
| 1 | Measures shown in the specifications and cross referenced |
| 2 | List of commissioned equipment and systems |
| 3 | Cx roles and responsibilities of all parties |
| 4 | Meeting requirements |
| 5 | Commissioning schedule management procedures |
| 6 | Procedures for addressing outstanding issues or non-compliance |
| 7 | Requirements for execution and documentation of installation and equipment start up |
| 8 | Specific testing requirements for each system type |
| 9 | Submittal review and approval requirements |
| 10 | Contents and approval process of the commissioning plan |
| 11 | Cx documentation and reporting requirements |
| 12 | Facility staff training requirements and verification procedures |
| 13 | O & M manual review and approval procedures |
| 14 | Systems manual development and approval procedures |
| 15 | Definitions |

**Commissioning Agent Acknowledgment**

I have reviewed the applicable construction documents listed above and verified their compliance with the owner’s project requirements, basis of design, and commissioning plan.

 Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Company Name (if applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Agent’s signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_