

"A 100% Employee Owned Company"

Authorized Signature: \_

**Printed Name:** 

10901 Pump House Road Annapolis Junction, MD 20701-1125 Balt.(410) 792-4230 • Wash.(301) 953-9370 Fax: (301) 490-7156

## Mechanical Equipment

## Sales & Service

## START UP / TRAINING REQUEST FORM

Return This Form MDservicesupport@cummins-wagner.com or Fax# 301-490-9518

<u>Type of Service Requested:</u> (please check appropriate box)		<u>Start Up:</u>		<u>]</u>	<u>Fraining:</u>			Requested Date		
Contractor:					C-W Sales Engin	ngineer:				
Project Name:	Marley Order #									
Address:				City:			State:		Zip Code:	
Jobsite Contact:					Jobsite Cor	ntact Number:		·		
Project Manager:					Project N	Ianager Phone:	Office:		Cell:	

Pump Intormation						
Tower Tag:						
Make:	Marley	RECOLD				
Model Number:			Serial Number:			
Voltage/Phase / Hz:			Horsepower:			
VFD Location: (if applicable)	Inside	Outside				
Comments:						

ooling 7	Tower	Yes	No
1.	Variable Speed Drives Attached.		
2.	Oil Level Switch Wired.		
3.	Vibration Switch Wired.		
4.	Damper Actuator (if used) Wired.		
5.	Base And Heater Pack Wired.		
6.	Level Controller Wired And Has Power.		
7.	Probes Are Wired.		
8.	Piping Complete.		
9.	Water Available.		
10.	VFD: Supplies with Tower.		
11.	VFD: Is It Wired.		
12.	VFD: Is The Control Wiring to VFD Complete.		
13.	Control Wiring In Separate Conduit		
14.	Disconnect Between Drive And Motor		
15.	If Yes, Is There A Safety Interlock In The Disconnect		

 Date:	
 Title:	

I hereby authorize request for Start-Up for equipment. I acknowledge that all equipment that is deemed not ready for requested service is subject to additional cost to complete start-up.