

FIELD INSPECTION REPORT

Quality Control Form

ITP No.: _____
 INSPECTION GRADE: _____
 REPORT NO. _____
 DATE _____

INSPECTION TYPE LOOP CHECKING - ESD/HIPS-	WORK No.		
	LOOP No.		
	LOOP DESCRIPTION		
	SIGNATURE		
	COMPANY	CONTRACTOR	
	/ /	/ /	/ /
SYSTEM NO.			
P&ID NO.			

ANALOG INPUT

	Tag:
Range / Unit	()
0%	
50%	
100%	
50%	
0%	
<input type="checkbox"/> HH(Set Point:)	
<input type="checkbox"/> H (Set Point:)	
<input type="checkbox"/> L (Set Point:)	
<input type="checkbox"/> LL(Set Point:)	
Line Fault Alarm (open)	
Line Fault Alarm (Short)	

DIGITAL INPUT

Tag:		
Field Contact	DCS / ESD Status	
On	Alarm	
Off	Normal	
Line Fault Alarm (open)		
Line Fault Alarm (Short)		

DIGITAL OUTPUT

Tag:		
F & G Output	Field Status	
True(1)	Close/On	
False(0)	Open/Off	
Line Fault Alarm (open)		
Line Fault Alarm (Short)		

DIGITAL OUTPUT TO VALVE

Tag:		<input type="checkbox"/> FC	<input type="checkbox"/> FO
F & G Output	Value Action		
True(1)	<input type="checkbox"/> Open	<input type="checkbox"/> Close	
False(0)	<input type="checkbox"/> Open	<input type="checkbox"/> Close	
Line Fault Alarm (open)			
Line Fault Alarm (Short)			

LIMIT SW INPUT

Tag:	Line Fault Alarm	
	(Open)	(Short)
Open		
Close		

VALVE ON-LINE TEST

Valve Stroke (Closing)	
SOV Function Test	

Comments: