



Unitywater

Serving you today, investing in tomorrow.

F8940 - OF and EMS Commissioning Check Sheet



F8940 - OF and EMS Commissioning Check Sheet

Document Details

This document is only valid on the day it was printed.

Document Owner	Manager Capital Delivery
References	OF&EMS Commissioning Worksheet

Contents

Contents 2

1. General	3
2. Commissioning Check Sheet	4
Overflow and Emergency Storage (EMS).....	4
Safety	4
Detention Times.....	4
Overflow Level	4
Level Indication.....	4
High/High-high Level Switches	5
Commissioning Checks Signoff	5

F8940 - OF and EMS Commissioning Check Sheet

1. General

This template shall be utilised for projects involving modifications to, or the construction of, new emergency storage or overflow structures.

Such works generally impact upon the existing high (emergency storage) and high-high (overflow) levels.

The use of this template ensures that existing level indication devices are adjusted to accommodate the modifications and accurately indicate wet well level and detect emergency storage and overflow events.

In using this document, due consideration of all other relevant Unitywater Standard Drawings and Unitywater Standard Specifications should be adhered to.

F8940 - OF and EMS Commissioning Check Sheet

2. Commissioning Check Sheet

PROJECT TITLE:	FINANCE NO:
Overflow and Emergency Storage (EMS)	Result / Init. / Date
Safety	
1. Check all commissioning personnel have been inducted to site	OK <input type="checkbox"/>
2. Check risk assessments and SWMS have been produced for all Pre-commissioning and Commissioning activities	OK <input type="checkbox"/>
3. The site is safe for commisioning works to commence. Safety requirements include: <ul style="list-style-type: none"> • Covers and grills installed and flush • Davit mounting points certified • Fall arest mounting points certified • Handrails, fencing, gates and chains installed correctly • Emergency procedures available • Safety signage in place (PPE, Elecricity, SWL, Danger etc.) 	OK <input type="checkbox"/>
Detention Times	
1. Ensure impacts of changes to emergency storage or overflow on the facilities detention times are assessed and recorded in OF&EMS Commissioning Worksheet	OK <input type="checkbox"/>
Overflow Level	
2. Ensure 'As Constructed' survey has been completed by licenced surveyor and record overflow level in OF&EMS Commissioning Worksheet Note that the overflow structure must remain isolated until the 'As Constructed' overflow level has been confirmed (to remain bunged off until level confirmed)	OK <input type="checkbox"/>
3. Check that the recorded overflow level takes into account any surcharge caused by the flap valve on the overflow pipe	OK <input type="checkbox"/>
4. Ensure impacts on upstream infrastructure from changes to overflow level have been assessed (i.e. lowest manhole upstream etc.)	OK <input type="checkbox"/>
Level Indication	
1. Check scaling of level probes conforms to design requirements (0-100%, 0-120% etc.) and record in OF&EMS Commissioning Worksheet	OK <input type="checkbox"/>
2. Record new pump operating levels for duty and follow/standby pumps in OF&EMS Commissioning Worksheet	OK <input type="checkbox"/>
3. Confirm wet well level indicated by the level probes is reflective of the actual wet well level	OK <input type="checkbox"/>



F8940 - OF and EMS Commissioning Check Sheet

High/High-high Level Switches			
1. Check installation and correct functioning of high (emergency storage) and high high (overflow) level switches (i.e. are they installed in the correct location to effectively detect high level and overflow level) and record in OF&EMS Commissioning Worksheet			OK <input type="checkbox"/>
Commissioning Checks Signoff			
To verify completion of all commissioning items to the satisfaction of Stakeholders.			
CONSTRUCTOR			
Name:	Position:	Signature:	Date:
UNITYWATER WITNESS (Commissioning)			
Name:	Position:	Signature:	Date:
UNITYWATER WITNESS (Operations)			
Name:	Position:	Signature:	Date:
UNITYWATER WITNESS (Electrical)			
Name:	Position:	Signature:	Date:
UNITYWATER WITNESS (SCADA)			
Name:	Position:	Signature:	Date:
UNITYWATER WITNESS (Mechanical)			
Name:	Position:	Signature:	Date: