

TABLE B1 COMMISSIONING CHECKLIST

AS 4214 Rev.20260218

① Fill in all applicable fields. Complete on screen, or print and fill in by hand in **BLACK PEN** using **BLOCK LETTERS**. If filling by hand, fill circles with a large dot to indicate your answer.

Identification of the Building:			
Site/building name:			
Address:			Postcode:

OR; enter the fire alarm company name:

TABLE B1 - COMMISSIONING CHECKLIST

Item	Task	Conformance			
		Yes	No	N/A	Verified by
1	System configuration	YES	NO	N/A	
2	Warning signs and notices	YES	NO	N/A	
3	Enclosure integrity	YES	NO	N/A	
4	Enclosure venting	YES	NO	N/A	
5	Storage containers:				
	a. Location	YES	NO	N/A	
	b. Number, size and marking	YES	NO	N/A	
	c. Charge quantity and dangerous goods label	YES	NO	N/A	
	d. Orientation	YES	NO	N/A	
	e. Mounting	YES	NO	N/A	
6	Release mechanisms:				
	a. Location	YES	NO	N/A	
	b. Connections	YES	NO	N/A	
	c. Actuating pressure lines	YES	NO	N/A	
	d. Mechanical release	YES	NO	N/A	
7	Manifolds and valves:				
	a. Joints and fastenings	YES	NO	N/A	

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7	Manifolds and valves: <i>(continued)</i>				
	b. Flexible connections	YES	NO	N/A	
	c. Discharge indicators	YES	NO	N/A	
	d. Pressure switches	YES	NO	N/A	
	e. Check valves	YES	NO	N/A	
	f. Directional valves	YES	NO	N/A	
	g. Pressure relief devices	YES	NO	N/A	
	h. Pressure reduction devices	YES	NO	N/A	
	i. Vent valves	YES	NO	N/A	
	j. Lock-off valves	YES	NO	N/A	
8	Pipework:				
	a. i. Layout	YES	NO	N/A	
	ii. Size and fitting orientation	YES	NO	N/A	
	iii. Joints, nozzles and supports	YES	NO	N/A	
	b. i. Pneumatic leak test	YES	NO	N/A	
	ii. Hydraulic pressure test	YES	NO	N/A	
	iii. Free passage	YES	NO	N/A	
9	Nozzles:				
	a. Drilling, stamping and orientation	YES	NO	N/A	
	b. Discharge safety	YES	NO	N/A	
	c. Secure fastenings	YES	NO	N/A	
10	Electrical system	YES	NO	N/A	

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		Yes	No	N/A	Verified by
11	Function tests:				
	a. Local alarm	YES	NO	N/A	
	b. Alarm signalling equipment	YES	NO	N/A	
	c. Plant shut-downs	YES	NO	N/A	
12	Actuation system test:				
	a. Audible discharge alarms	YES	NO	N/A	
	b. Visual warning devices	YES	NO	N/A	
	c. Door closures and ventilation dampers	YES	NO	N/A	
	d. Discharge time delay	YES	NO	N/A	
	e. Directional valves	YES	NO	N/A	
	f. Storage container release actuators	YES	NO	N/A	
13	Manual release devices	YES	NO	N/A	
14	Inhibit switch	YES	NO	N/A	
15	Lock-off valve	YES	NO	N/A	
16	Pneumatic equipment	YES	NO	N/A	
17	Discharge test	YES	NO	N/A	
18	Remarks	YES	NO	N/A	

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