### Test Record for Pressure/Vacuum**

**Test of HVAC System**

<table>
<thead>
<tr>
<th>Client:</th>
<th>Subcontractor:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Project No.:</td>
<td>Subcontract P.O. No.:</td>
</tr>
<tr>
<td>Project Name:</td>
<td>System designation:</td>
</tr>
</tbody>
</table>

Reference Document: BN-G-Y014, 14.4

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**Items to inspect**

<table>
<thead>
<tr>
<th>Subcontractor</th>
<th>Company</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>inspected initials/date</td>
<td>Hold Point</td>
<td>inspected* initials/date</td>
</tr>
</tbody>
</table>

**1.0 Preparation**

- Test procedure approved
- System sealed, test limits noted
- Estimated test system volume ......................m³
- Measuring equipment calibrated and connected

**2.0 Test**

- Duration: start time ..........hr, date........ 
  finish time ..........hr, date........
  = ..................... hr duration
- Pressure/Specified ......................Pa
- Vacuum**Measured ......................Pa
- Leakage: Specified < ......................m³/hr
  Measured ...................... m³/hr
- Deflection: Specified < ......................mm
  Measured ...................... mm

**Conclusion:**

**3.0 Re-instatement**

- Completed

H - Company’s presence is mandatory for all activities in section.

Accepted for Subcontractor: Name: Signature: Date: 
Accepted for Company: Name: Signature: Date: 
Accepted for Client: Name: Signature: Date: 

*Company only initials for holdpoint
**Delete as necessary

Attachments, No. of pages: C:\RB_Forms\RB26G05.DOT
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