PLC DISCRETE OUTPUT CHECKLIST

Project	
Facility:	Project Name:
Area :	Bid Opportunity:

PLC	
PLC ID:	Description:
Rack:	Slot:

Pt	Tag	Description	State	State Desc.	PLC Output	Field Device	Pass (P/F)
			0		☐	☐	
			1		☐	☐	
			0		☐	☐	
			1		☐	☐	
			0		☐	☐	
			1		☐	☐	
			0		☐	☐	
			1		☐	☐	
			0		☐	☐	
			1		☐	☐	
			0		☐	☐	
			1		☐	☐	
			0		☐	☐	
			1		☐	☐	
			0		☐	☐	
			1		☐	☐	
			0		☐	☐	
			1		☐	☐	
			0		☐	☐	
			1		☐	☐	
			0		☐	☐	
			1		☐	☐	

					☐	☐	
			0		☐	☐	
			1		☐	☐	
			0		☐	☐	
			1		☐	☐	
			0		☐	☐	
			1		☐	☐	
			0		☐	☐	
			1		☐	☐	

Comments:

	Company	Name	Signature	**Date** (yyyy/mm/dd)
Tested By				
Witnessed By				

Project	
Facility:	Project Name:
Area :	Bid Opportunity:

Instrument		
Tag:	Description:	
Manufacturer:	Model:	Serial Number:

Inspection Checklist

No.	Item to be Inspected	Comments	Pass (P/F)
1.	Instrument type and class per P&ID and specification		
2.	Instrument tag(s) installed and correct		
3.	Installation of sensor complete and correct		
4.	Block and drain valves		
5.	Pneumatic / hydraulic tubing leak tested		
6.	Heat tracing / insulation / instrument housing		
7.	Wiring correct		
8.	Drawings marked up as-built		
9.	HMI Graphic symbol and tag correct		

State Checklist

State State Desc	PLC Input	Local HMI	SCADA	Alarm		Pass (P/F)
0	☐	☐	☐	☐ On ☐ Off	☐ N/A	
1	☐	☐	☐	☐ On ☐ Off		

Calibration

Transition	Setpoint Trip Point (incl. units)	Actual Trip Point (incl. units)	Setpoint Time Delay	Actual Time Delay	Pass (P/F)
0 → 1					
1 → 0					

Comments:

	Company	Name	Signature	Date (yyyy/mm/dd)
Tested By				
Witnessed By				

Project	
Facility:	Project Name:
Area :	Bid Opportunity:

Instrument (Sensor / Element)		
Tag:	Description:	
Manufacturer:	Model:	Serial Number:

Transmitter		
Tag:	Description:	
Manufacturer:	Model:	Serial Number:
Units:	Design Range: -	
Output	☐ 4-20 mA ☐ Modbus ☐ Other: ☐ 0-10 V ☐ Ethernet IP	

Inspection Checklist		
No.	**Item to be Inspected**	**Comments**	**Pass (P/F)**
1.	Instrument type and class per P&ID and specification		
2.	Instrument tag(s) installed and correct		
3.	Installation of sensor complete and correct		
4.	Block and drain valves		
5.	Pneumatic / hydraulic tubing leak tested		
6.	Heat tracing / insulation / instrument housing		
7.	Impulse lines pressure tested		
8.	Wiring correct		
9.	Drawings marked up as-built		
10.	HMI Graphic symbol, tag and units correct		

Signal Validation					
Input Signal	Location	Design Value	Actual Value	Error (%)	Pass (P/F)
	Transmitter Display				
	Transmitter Output				
	Process Display				
	PLC				
	HMI				
	Transmitter Display				
	Transmitter Output				
	Process Display				
	PLC				
	HMI				
	Transmitter Display				
	Transmitter Output				
	Process Display				
	PLC				
	HMI				

Notes:
1. Attach factory calbration forms for all instruments where provided and/or specified.
2. Provide instrument parameters for each parameter changed from the factory default.

Comments:

	Company	Name	Signature	Date (yyyy/mm/dd)
Tested By				
Witnessed By				

Project	
Facility:	Project Name:
Area :	Bid Opportunity:

PLC	
PLC ID:	Description:
Rack:	Slot:

Pt	Tag	Description	State	State Desc.	PLC Input	Local HMI	SCADA	Alarm		Pass (P/F)
			0		☐	☐	☐	☐ On ☐ Off	☐ N/A	
			1		☐	☐	☐	☐ On ☐ Off		
			0		☐	☐	☐	☐ On ☐ Off	☐ N/A	
			1		☐	☐	☐	☐ On ☐ Off		
			0		☐	☐	☐	☐ On ☐ Off	☐ N/A	
			1		☐	☐	☐	☐ On ☐ Off		
			0		☐	☐	☐	☐ On ☐ Off	☐ N/A	
			1		☐	☐	☐	☐ On ☐ Off		
			0		☐	☐	☐	☐ On ☐ Off	☐ N/A	
			1		☐	☐	☐	☐ On ☐ Off		
			0		☐	☐	☐	☐ On ☐ Off	☐ N/A	
			1		☐	☐	☐	☐ On ☐ Off		
			0		☐	☐	☐	☐ On ☐ Off	☐ N/A	
			1		☐	☐	☐	☐ On ☐ Off		
			0		☐	☐	☐	☐ On ☐ Off	☐ N/A	
			1		☐	☐	☐	☐ On ☐ Off		
			0		☐	☐	☐	☐ On ☐ Off	☐ N/A	
			1		☐	☐	☐	☐ On ☐ Off		
			0		☐	☐	☐	☐ On ☐ Off	☐ N/A	
			1		☐	☐	☐	☐ On ☐ Off		
			0		☐	☐	☐	☐ On ☐ Off	☐ N/A	
			1		☐	☐	☐	☐ On ☐ Off		
			0		☐	☐	☐	☐ On ☐ Off	☐ N/A	
			1		☐	☐	☐	☐ On ☐ Off		

					□	□	□	□ On □ Off	□ N/A	
			0		□	□	□	□ On □ Off		
			1		□	□	□	□ On □ Off		
			0		□	□	□	□ On □ Off	□ N/A	
			1		□	□	□	□ On □ Off		
			0		□	□	□	□ On □ Off	□ N/A	
			1		□	□	□	□ On □ Off		
			0		□	□	□	□ On □ Off	□ N/A	
			1		□	□	□	□ On □ Off		

Comments:

	Company	Name	Signature	Date (yyyy/mm/dd)
Tested By				
Witnessed By				