

Installation Checklist

SL.NO: 04019842520002

Bar Code: 04019842520002

Customer Name: Ms. Anitha Reddy .

Comp/Institute: Indian Immunologicals Ltd.

Before Installation

- | | | |
|---|---|--------------------------------|
| 1) Is the received consignment in good condition? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2) Is the unit is physically in good condition? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3) Verified the received consignment. | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4) Inspect installation area: | | |
| i. Proper Ventilation | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> NO/NA |
| ii. Plane Surface | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> NO/NA |
| iii. Surrounding ambient temperature < 40 degreee | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> NO/NA |
| 5) Inspect the Power Supply | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |

During Installation

- | | | |
|---|--|---|
| 6) Change the 3-pin top | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> NO/NA |
| 7) Loop IN/OUT let with barbed fitting | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 8) Fill the unit with suitable bath liquid | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 9) Startup message verified | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> NO/NA |
| 10) Check for the leakages | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 11) Run the unit independently without load | <input checked="" type="checkbox"/> Working Fine | <input type="checkbox"/> No |
| 12) Set the safety values | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

Safety Steps

- | | | |
|--|---|-----------------------------|
| 13) Unit working checked for -ve and +ve temperature | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| 14) Operate the unit with load | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |

User Demonstration

- | | | |
|--|---|--|
| 15) Explained Standard working Procedure | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> NO/NA |
| 16) Explained safety steps to customer | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> Already know |
| 17) Explained easy maintenance steps | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| 18) Explained about general error codes | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| 19) 1Plus Warranty Registration done. | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

Date: 10/03/2025

Performed by: Bhuvan/Shekhar
Engineer's Signature



Customer Signature:



INSTALLATION REPORT



Employee Name: Bhuvan/Shekhar

Date & Time : 10/03/2025 02:39 PM

Report Date	2025-03-10
Name	Anitha Reddy .
Contact Type	New
Unit of performance	unit working fine without any issue checked temperature from rt+5 to100°C
Joint Visit	Parchuri BhuvanaChandra
Company	Indian Immunologicals Ltd.
Designation	Manager
Department	Human Health QC
Company Address	Indian Immunologicals Colony, Hyderabad Telangana 500032
Mobile Number	7675854025
Email	anithareddy@indimmune.com
Customer PO with Date	4511005137 - 11/26/2024
Invoice No. with Date	
Inspection of Consignment	Check the physical condition of the consignment and unit found okay
Principle	DAIHAN Scientific Co., Ltd.
Model	
Serial No.	04019842520002
Barcode	04019842520002
Part No (Accessories Supplied)	
Quantity(Accessories supplied)	
Application	unit is used for heating of vaccine
Start Time	10/03/2025 10:11 AM
End Time	10/03/2025 03:24 PM
Remarks	installation completed iq oq documentation done
GuideLines/SOP	1.always connect the unit with proper voltage supply 2.do not use broken power cord. 3.clean the ceramic plate after use 4. always turn off the heating when not using

