



Comfort. Under control.

CheckList Information

Name : _____ **Status :** NotSubmitted

Assigned Organization : National TAB **Asset :** _____

Requesting Organization : National TAB

CheckList Item Details

MANDATORY SCHEDULING INFORMATION (THE INFORMATION BELOW IS REQUIRED TO BE FILLED OUT PRIOR TO JOB BEING PLACED ON THE SCHEDULE)

Certificate of Occupancy (C.O.) date: **Projected date is (8/8)**

Substantial completion / punch walk date: **August 8**

Is the TAB report required for the city to issue the C.O.? **Yes**

Permanent power is provided to the building? If not when is it scheduled **Power is tentatively scheduled to be cut on next week**

Fire final date: **Not yet scheduled**

Scheduled date for startups:

Opening date **Week of July 24th**

Tentative TAB Date: **Week of July 31st**

BUILDING INFORMATION

Does building have a roof hatch or a ladder for roof access? **Yes**

Will there be ladders available on site to access ductwork above the ceiling? **No**

IN ORDER FOR US TO ARRIVE ON SITE, THE FOLLOWING ITEMS MUST BE COMPLETED PRIOR TO OUR ARRIVAL ON SITE. (THERE WILL BE A CANCELLATION CHARGE IF CANCELLED AFTER ARRIVAL)

Gas service is provided to the building **No gas at this site**

Doors and windows installed **Yes**

Thermostats and sensors are 100% wired and functional

Completed by July 28

All ceiling tiles are installed

Completed by July 28

Kitchen equipment in place under the hood and able to be turned on

Equipment installed, waiting on power for start ups

Ductwork and diffusers are all installed?

Yes

Mechanical contractor will be on site for duration of TAB or on-call and available to be on site within 30 minutes?

Can be on call

Notes/Comments :