



Comfort. Under control.

CheckList Information

Name : *TROY Cramer* 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: *T.B.D.*

Substantial completion / punch walk date: *10/18/23*

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

Permanent power is provided to the building? If not when is it scheduled *yes*

Fire final date: *T.B.D.*

Scheduled date for startups: *T.B.D.*

Opening date *11/1/23*

Tentative TAB Date: *10/16/23*

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? *yes*

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 *yes*

Doors and windows installed *yes*

Thermostats and sensors are 100% wired and functional *Yes*

All ceiling tiles are installed *Yes*

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

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? *NO*

Notes/Comments :