

Facility Commissioning Start-Up Checklist	Yes	No	NA	Date	Initial	Comments
<b>A. Safety</b>						
1. Fire extinguishers in place at every door?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
2. First aid equipment in place:						
▫ Eyewash Station(s)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
▫ Fire Blanket(s)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
▫ First Aid Kit(s)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
3. Gas detection equipment in place:						
▫ Fixed monitors?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
▫ Portable monitors?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
▫ Personal monitors?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
▫ O <sub>2</sub> monitors?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
4. Fire eyes in place?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
5. Emergency shower in place?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
6. Emergency Evac Transportation?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
7. Wind socks mounted?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
8. Has all site personnel been oriented?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
9. Site personnel & equipment sign up sheets current?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
10. Emergency routes posted?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
11. Emergency muster areas clearly identified?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
12. Emergency equipment checked and ready:						
▫ SCBA(s) checked and ready	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
▫ SABA(s) checked and ready	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____

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13. What is your primary outside communication?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
14. What is your secondary outside communication?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
15. Extra hearing protection in place?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
16. Garbage and debris removed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
17. Has a site hazard I.D. been performed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
18. Has a hazard analysis been completed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
19. Are the following on site: <ul style="list-style-type: none"> <li>▫ Operating Manual?</li> <li>▫ Safety Manual?</li> <li>▫ HAZOP Manual?</li> <li>▫ P&amp;ID Drawings?</li> <li>▫ Copy of QHSE Manual?</li> <li>▫ Start up procedures?</li> </ul>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	_____ _____ _____ _____ _____ _____	_____ _____ _____ _____ _____ _____	_____ _____ _____ _____ _____ _____
20. Site equipment signs up?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
21. Spill containers in place?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
22. Spill kits in place?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
23. Sufficient rags / soaker pads on site?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
24. Containers for contaminated solids?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
25. Containers for contaminated liquids?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
26. Containers for contaminated rags / soaker pads?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
27. Emergency operational plans in place?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
28. Pre-Start up safety meeting?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			

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29. Emergency phone list in place?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
▫ Phone # Hospital	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
▫ Phone # Emergency Evac Transportation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
▫ Phone # RCMP	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
▫ Phone # AEUB	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
▫ Phone # OH&S	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
▫ Phone # Fire	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
▫ Phone # CANUTEC	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
▫ Phone # Vacuum Trucks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
▫ Phone # Steamer Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
▫ Client Start Up Coordinator	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
▫ Client Safety Coordinator	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
▫ Project Engineer Name	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
▫ Client Site Mechanical Inspector	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
▫ Client Site Electrical Inspector	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
▫ Site Safety Coordinator	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
▫ General Contractor Foreman and Crew	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
▫ Electrical Contractor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
▫ Instrumentation Contractor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
▫ PLC Programmer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
▫ RTU Programmer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
▫ First Aid Attendant	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____

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▫ Security	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
▫ Specialty Contractor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
▫ Other: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
▫ Other: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
<b>B. General</b>						
1. Facility MFDs “yellow lined” confirmed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
2. Operational Manual on site?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
3. Equipment and tanks grounded?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
4. 24 VDC system commissioned?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
5. Telephone call out system functional?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
6. Confirm PLC function matches shutdown key?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
7. PSV vents piped to safe locations and not pocketed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
8. PSV set points confirmed and seal wires intact?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
9. Shipping tape removed from vents?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
10. Calibration reports on meters and controllers completed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
11. Level gauges cover control ranges?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
12. Level control floats installed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
13. Other ship loose instruments installed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
14. X-Ray and Hydrotest completed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
15. Lines dewatered?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
16. Tape and leak test flanges?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
17. Screw fittings tight and tested?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			

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18. Insulating kits installed and in correct location?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
19. Purge procedures established?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
20. Gathering system purged to inlet?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
21. Fuel system commissioned?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
22. Building heaters commissioned?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
23. Heat tracing system commissioned?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
24. All building ice rakes and canopies installed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
25. All WHMIS requirements met?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
<b>C. Wellsite</b>						
1. Loop check RTU functions?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
2. Confirm PLC function matches shutdown key?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
3. Methanol system commissioned?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
4. Corrosion inhibitor system commissioned?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
5. Function test controls?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
6. Confirm ESD set points?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
7. Orifice plate installed correctly and size confirmed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
8. Telemetry confirmed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
List locations commissioned						

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<b>D. Inlet Header Area</b>						
1. Review start and fuel gas supply for initial start?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
<b>E. Compressor</b>						
1. Compressor curves and limits on site and reviewed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
2. Start-up spares available on site?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
3. Lubricants and coolant on site and installed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
4. Drawings on site for compressor panel?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
5. Loop checks complete from compressor panel to end devices?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
6. Calibration reports on temperature and pressure shutdowns?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
7. Manometers on manifold functional?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
8. Pyrometer working?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
9. Vibration switches working?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
10. Compressor power generator commissioned?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
11. Piping clamped down and not rubbing other piping or supports?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
12. PSVs and piping properly supported?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
13. Start-up screens installed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
14. Check fuel regulators, springs and orifices?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
15. Check start gas regulators, springs and orifices?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
16. Check blinds?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
17. Check valve direction and internals confirmed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
18. Low points drained?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			

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19. Filter separator elements checked?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
20. Drains not tied to distance pieces?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
21. Check crankcase vent system?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
22. Proper compressor valves and spacers installed and noted?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
23. Air intake filters installed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
24. Catalytic element installed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
25. Fan pitch confirmed and noted?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
26. Cooler louvers function tested?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
27. Pile cap welding inspected?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
28. Enviropan inspected?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
29. Confirm level engine crankcase?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
30. Confirm level compressor crankcase?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
31. Confirm level compressor cylinder oil?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
32. Confirm level engine glycol?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
33. Engine and compressor level controls open?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
34. Cold alignment complete?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
35. Hot alignment complete?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
36. Compressor balance report reviewed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
37. Compressor mechanic completed all alignment and pre-start checks?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
38. Compressor purged to final blowdown?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
39. Drains purged?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
40. Fuel gas scrubber purged?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			

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41. Start gas system reviewed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
<b>F. Dehydrator</b>						
1. Operating instructions on site?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
2. Dew point tester on site?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
3. Chemical cleaning required?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
4. Fill bulk tank and reboiler?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
5. Check glycol circulation & confirm proper rate?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
6. Check heat tracing circulation?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
7. Install glycol filters?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
8. Check controllers and valves for proper signal operation?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
9. Level switches confirmed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
10. Still vent stack at 45 degrees upward for sweet process?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
11. Still vent stack tied into low pressure flare for sour process?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
12. Thief hatch inspected?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
13. Cone relief on reboiler & installed at safe location?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
14. Fire tube inspected?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
15. Sales meter orifice plate installed and size confirmed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
16. Process purged?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
17. Tower drained and purged?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
18. Filter drained?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
19. Fuel scrubber drained and purged?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			

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20. Stripping gas operational and rate confirmed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
<b>G. Tanks</b>						
1. Truck grounding in place?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
2. Fire tube protected by level switches?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
3. Anodes or other internals installed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
4. Thief hatches function tested and open?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
5. Burner lit and function tested?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
<b>H. Flare / Vent System</b>						
1. PSV vents piped to safe location and not pocketed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
2. Appropriate level switches installed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
3. Positive purge established & rate confirmed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
4. Ignitor commissioned?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
5. Distance to combustible materials reviewed (1.5 x stack height)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			