



INSTALLATION QUALIFICATION PROTOCOL FOR DISPENSING BOOTH

CUSTOMER:

EQUIPMENT: DYNAMIC PASS BOX

(_____ W x _____ D x _____ H mm)

SUBMITTED BY:

PHARMA ENGINEERS

PLOT NO. 113/A/1, LANE 8, PHASE II,
IDA CHERLAPALLI, HYDERABAD- 500051.

Tel No.91-40 27261113, 27261114

INSTALLATION QUALIFICATION PROTOCOL APPROVAL

This document is prepared by the documentation team of **M/S. PHARMA ENGINEERS** for

EQUIPMENT : DISPENSING BOOTH

PLANT /PROJECT :

CLIENT :

Hence this document before being effective shall be approved by *Client / Customer*

M/s. PHARMA ENGINEERS:

	Name	Designation	Signature	Date
Prepared By				
Reviewed By				

CLIENT / CUSTOMER:

	Name	Designation	Signature	Date
Reviewed By				
Approved By				

Client:

Supplier/ Manufacturer: **PHARMA ENGINEERS, HYDERABAD**

Equipment: **DISPENSING BOOTH** (_____ W x _____ D x _____ H mm)

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INSTALLATION QUALIFICATION (IQ)

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MASTER DOCUMENT

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INSTALLATION QUALIFICATION (IQ)

1. OBJECTIVE

The objective of this document is to verify that the Dispensing Booth (tag no: _____) is installed with due considerations as specified in DQ of Dispensing Booth.

2. RESPONSIBILITIES

M/s. Pharma Engineers:

1. To install and position the equipment with proper orientation.
2. To provide the necessary test certificates as per technical specifications specified in DQ.
3. To Complete the equipment qualification.



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3. SCOPE OF SUPPLY OF COMPONENTS:

PURPOSE

This test is to verify that the equipment dimensions, position and sizes of utility connections are in compliance with the design qualification and also with as-built drawing.

PRE-REQUISITES

1. As built drawing
2. Measuring tape
3. Approved Design Qualification Document

TEST METHOD

1. Physically check the dimension of the equipment in length, width, and height and confirm with design document.
2. Physically check and confirm that required indications are mentioned on the equipment like, safety indication.
3. Deviations or remarks may be documented along with summary of all test results

COMPONENT VERIFICATION

SR.NO	DESCRIPTION	SPECIFICATIONS AS PER DESIGN QUALIFICATION	CRITERIA FULFILLED (YES/NO)
1.	CONSTRUCTIONAL DETAILS:		
	Equipment TAG Number		
	Unit Serial Number		
	Manufacturers name	M/s Pharma Engineers	
	Qty	01 No.	
	Working Area (width x Depth x Height) mm	1870 x 1280 x 2000 mm	
	Overall Size (width x Depth x Height) mm	1970 x 1830 x 2400 mm	

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INSTALLATION QUALIFICATION (IQ)

SR.NO	DESCRIPTION	SPECIFICATIONS AS PER DESIGN QUALIFICATION	CRITERIA FULFILLED (YES/NO)
	M.O.C	SS 304, 20G, Matt Finish	
2.	BLOWER DETAILS		
	Make	KRUGER	
	Serial Number		
	Model	KDD 9X9 S	
	Power	405 W, 1 Ø, 50 Hz	
	R.P.M	1150 RPM	
	Qty	2 No	
3.	FILTRATION SCHEME WITH IN EQUIPMENT		
	PRE - FILTER		
	Make	M/s. ULTRAFIL AIR SYSTEMS	
	Type	Flange Type	
	Test Method	EN 779	
	Filter Classification as per EN779	G-4	
	Media	Synthetic media	
	Avg. arrestance of synthetic dust	$90 \leq Am$	
	Equivalent particle size in terms of market language	10 microns -Un authenticated data	
	Size	855x690x75 mm	
	Qty	2 No.	
	I.P.D of Filter (Approximate)	1 to 06 mm of WC	
	F.P.D of Filter (Approximate)	25 mm of WC	
	Serial Number		
	NOTE: I.P.D & F.P.D values change based on AIRFLOW; hence customer should set the limits after commissioning.		
4.	FINE FILTER		
	Make	M/s. ULTRAFIL AIR SYSTEMS	
	Type	Flange Type	
	Test Method	EN 779	
	Filter Classification as per EN779	M-5	
	Media	Synthetic media	
	Avg. arrestance of synthetic dust	$40 \leq Em < 60\%$	
Equivalent particle size in terms of	5 microns-Un		

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SR.NO	DESCRIPTION	SPECIFICATIONS AS PER DESIGN QUALIFICATION	CRITERIA FULFILLED (YES/NO)
	market language	authenticated data	
	Size	775 X 615 X 150 mm	
	Qty	2 No.	
	I.P.D of Filter (Approximate)	5 to 15 mm of WC	
	F.P.D of Filter (Approximate)	45 mm of WC	
	Serial Number		
	NOTE: I.P.D & F.P.D values change based on AIRFLOW; hence customer should set the limits after commissioning.		
	HEPA FILTER		
	Make	AAF	
	Type of filter	BOX	
	Test method	EN 1822	
	Filter classification	H-14	
	Avg. efficiency at MPPS	99.995%	
	Media MOC	Micro fiber glass	
	Washable compatibility	No	
5.	Equivalent particle size in terms of market language	99.999% down to 0.3 micron-Un authenticated data	
	Size	915 X 610 X 69 mm	
	Qty	4 No's	
	I.P.D of Filter (Approximate)	10 to 15 mm of WC	
	F.P.D of Filter (Approximate)	50 mm of WC	
	Serial Number		
	NOTE: I.P.D & F.P.D values change based on AIRFLOW; hence customer should set the limits after commissioning.		
	EXHAUST HEPA FILTER		
	Make	AAF	
	Type of filter	BOX	
	Test method	EN 1822	
	Filter classification	H-14	
	Avg. efficiency at MPPS	99.995%	
	Media MOC	Micro fiber glass	
	Washable compatibility	No	
6.	Equivalent particle size in terms of	99.999% down to 0.3	

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SR.NO	DESCRIPTION	SPECIFICATIONS AS PER DESIGN QUALIFICATION	CRITERIA FULFILLED (YES/NO)
	market language	micron-Un authenticated data	
	Size	610 X 150 X 69 mm	
	Qty	2 No's	
	Serial Number		
	INSTRUMENTATION DETAILS		
	DIFFERENTIAL PRESSURE GAUGES		
	Make	DWYER	
	Type	Analog Gauge	
	Range	0 to 50 mm of WC	
	Location	Across Pre-Filter	
7.	Qty	1 No	
	Serial Number		
	Location	Across Fine Filter	
	Qty	1 No	
	Serial Number		
	Location	Across HEPA Filter	
	Qty	1 No	
	Serial Number		
	CFL LIGHT		
8.	Make	Havells	
	Length	4'	
	Qty	1 No	
	ACCESSORIES		
9.	ON/OFF Switch for Blower	6 Amps Selector Switches / 01 No's	
	ON/OFF Switch for CFL LIGHT	6 Amps Selector Switches / 01 No's	
	PAO, ATM & DOP Ports	SS 304 with Matt finish	
	Gasket	Food grade gasket	

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ACCEPTANCE CRITERIA

Dimensions and supply connections of the system should comply with DQ document and as built drawings.

However, the acceptance is up to the judgment of experts if any deviation in the readings.

REMARKS (IF ANY):



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Test Conducted By

Test Witnessed By

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4. VERIFICATION OF CALIBRATION OF INSTRUMENTS

S.no.	Instrument Type	Location	Instrument Tag Number	Calibrated on	Calibration Due
1.					
2.					
3.					
4.					
5.					
6.					

Remarks (if any):

Submitted By

Checked By

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5. LIST OF DOCUMENTS ENCLOSED

S.NO	DOCUMENT NAME	ENCLOSED (YES/ NO)
1.	TEST CERTIFICATE OF DISPENSING BOOTH	
2.	TEST CERTIFICATE OF BLOWER	
3.	TEST CERTIFICATE OF FILTERS	
4.	TEST CERTIFICATE OF MAGNEHELIC GAUGE	

Remarks (if any):

Submitted By

Checked By