



INSTALLATION QUALIFICATION PROTOCOL FOR DYNAMIC PASS BOX

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 : DYNAMIC PASS BOX TAG NO. (_____)

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: **DYNAMIC PASSBOX** (_____ W x _____ D x _____ H mm)

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INSTALLATION QUALIFICATION (IQ)

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PHARMA ENGINEERS®
HYDERABAD
MASTER DOCUMENT

Client:

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INSTALLATION QUALIFICATION (IQ)

1. OBJECTIVE

The objective of this document is to verify that the dynamic pass box (**TAG NO**) is installed with due considerations as specified in DQ of dynamic pass box (**TAG NO**).

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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INSTALLATION QUALIFICATION (IQ)

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.	
	Internal size (width x Depth x Height) mm	600 x 600 x 1000 mm	
	External size (width x Depth x Height) mm	740 x 680 x 1750 mm	
	M.O.C	SS 304, 20G, Matt Finish	

Client:

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INSTALLATION QUALIFICATION (IQ)

SR.NO	DESCRIPTION	SPECIFICATIONS AS PER DESIGN QUALIFICATION	CRITERIA FULFILLED (YES/NO)
2.	BLOWER DETAILS		
	Make	EBM PAPST INDIA PRIVATE LIMITED	
	Serial Number		
	Model	D4E 180-CA02-02	
	Power	405 W, 1 Ø, 50 Hz	
	R.P.M	1200 RPM	
	Qty	1 No	
3.	FILTRATION SCHEME WITH IN EQUIPMENT		
	FRESH AIR FILTER		
	Make	M/s. ULTRAFIL AIR SYSTEMS	
	Type	BOX Type	
	Test Method	EN 779	
	Filter Classification as per EN779	M5	
	Media	Synthetic media	
	Avg. efficiency at 0.4 micron	$40 \leq E_m < 60\%$	
	Equivalent particle size in terms of market language	5microns-Un authenticated data	
	Size	160 X 160 X 50 mm	
	Qty	1No.	
	Serial Number		
4.	PRE-FILTER		
	Make	M/s. ULTRAFIL AIR SYSTEMS	
	Type	Flange Type	
	Test Method	EN 779	
	Filter Classification as per EN779	G4	
	Media	Synthetic media	
	Avg. arrestance of synthetic dust	$90 \leq A_m$	
	Equivalent particle size in terms of market language	10 microns -Un authenticated data	
	Size	450 X 305 X 50 mm	
	Qty	2 No.	
Serial Number			

Client:

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INSTALLATION QUALIFICATION (IQ)

SR.NO	DESCRIPTION	SPECIFICATIONS AS PER DESIGN QUALIFICATION	CRITERIA FULFILLED (YES/NO)
5.	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	
	Equivalent particle size in terms of market language	99.999% down to 0.3 micron- Un authenticated data	
	Size	450 X 450 X 69 mm	
	Qty	1 No's	
	Serial Number		
	I.P.D of Filter (Approximate)	10 to 15 mm of WC	
	F.P.D of Filter (Approximate)	50 mm of WC	
NOTE: I.P.D & F.P.D values change based on AIRFLOW; hence customer should set the limits after commissioning.			
6.	INSTRUMENTATION DETAILS		
	DIFFERENTIAL PRESSURE GAUGES		
	Make	DWYER	
	Type	Analog Gauge	
	Range	0 to 50 mm of WC	
	Location	Across HEPA Filter	
	Qty	1 No	
Serial Number			
7.	CFL LIGHT		
	Make	Crompton	
	Length	4'	
	Qty	1 No	

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SR.NO	DESCRIPTION	SPECIFICATIONS AS PER DESIGN QUALIFICATION	CRITERIA FULFILLED (YES/NO)
8.	UV LIGHT		
	Make	PHILIPS	
	Length	4'	
	Qty	1 No.	
9.	HOUR METER		
	Make	Selec	
	Range	999999 Hrs	
	Qty	01 No's	
10.	ACCESSORIES		
	ON/OFF Switch for Blower	6 Amps Selector Switches / 01 No's	
	ON/OFF Switch for UV/ CFL LIGHT	6 Amps Selector Switches / 01 No's	
	Door handles and hinges	SS 304 with Matt finish	
	PAO, ATM & DOP Ports	SS 304 with Matt finish	
	Gasket	Food grade gasket	

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):

Test Conducted By

Test Witnessed By

Client:

Supplier/ Manufacturer: PHARMA ENGINEERS, HYDERABAD

Equipment: DYNAMIC PASSBOX (_____ W x _____ D x _____ H mm)

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INSTALLATION QUALIFICATION (IQ)

4. VERIFICATION OF CALIBRATION OF INSTRUMENTS

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

Remarks (if any):

Submitted By

Checked By

Client:

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INSTALLATION QUALIFICATION (IQ)

5. LIST OF DOCUMENTS ENCLOSED

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

Remarks (if any):

Submitted By

Checked By