

**startup questionnaire:**

**We are unable to confirm the date of startup until the completed form is submitted.**

Equipment Serial #: \_\_\_\_\_

Site address: \_\_\_\_\_

POC name and number: \_\_\_\_\_

Start time: \_\_\_\_\_

PPE: \_\_\_\_\_

Special instructions upon arrival: \_\_\_\_\_

Security clearance needed: \_\_\_\_\_

Is your system wired with all the required power?       YES     NO

Is all plumbing completed, including the sample line?     YES     NO

Are all pipe fittings appropriate for your operating pressures?     YES     NO

***Cancellation policy:***

***Cancellation of startup within 14 days of confirmed date may result in a cancellation fee.***

Thank you,

South-Tek Systems  
Service Dept.