

PROJECT VERIFICATION FORM FOR INSTALLERS

Installers MUST complete all applicable tests prior to contacting Lencore.

Please fill out all fields and send completed form along with the **OP Report & As-Builts** to install_complete@lencore.com

PROJECT INFORMATION

Jobsite: _____

Installer: _____

Wiring Diagram Date: _____

DATA CABLE VERIFICATION

- Logged into Sound Manager
- All OP's Online (Green)
- Generate OP Report

SYSTEM TESTS

System Turned on & Inspected: Yes No

All Speakers Tested & Working Properly/Sound Masking Active: Yes No

OP's are Displaying Correct ID #'s: Yes No

PAGING/MPI TESTS

Paging Successfully Tested with Ring Down Unit: Yes No

Mic Paging Tested: Yes No N/A

Client Phone Line Connected: Yes No Phone#/Ext *(if known)* _____

Audio Tested (if applicable) by Playing Music through the MPI Yes No

**In Sound Manager, create an Audio Zone that Includes all OP's & Channels*

SUBMITTALS

As-Builts Submitted: Yes No

ADDITIONAL NOTES