

Cannon Mini Automatic Viscometer Installation Qualification Procedure

Customer: _____ **Location:** _____ **Bath** _____ **of** _____

CMAV s/n: _____ **Service Unit s/n:** _____ **Date:** _____ **Technician:** _____

Visc Tube s/n: _____ **Range:** _____

<u>Date or N/A</u>	<u>Component Change</u>	<u>Reason</u>
_____	(A) Power Supply	_____
_____	(B) Electronics Assy.	_____
_____	(C) Pneumatics Assy.	_____
_____	(D) Tube # _____	_____

<u>Procedure</u>	<u>Initials</u>	<u>Date</u>	<u>2nd √ Date if Change A-D</u>
<i>PREINSTALLATION:</i>			
1. Electrical Power (as specified by user)			
2. Sample/Waste Disposal.			
3. Cooling (For Instruments maintaining bath temperature below 40C)			
4. Ventilation (Customer supplied as required)			
5. Laboratory Environment (temperature, all safety features as required by customer)			
6. Installation Area (Determined by number of units to be installed)			
7. Solvent (Customer supplied to be compatible with material being tested)			
8. Computer (If not purchased with unit contact Cannon for specifications)			
<i>INSTALLATION:</i>			
9. Verify service unit voltage and frequency.			
10. Check head unit for loose wires, cables, and proper crimps.			
11. Check rear of unit for loose wires, cables, and proper crimps.			
12. Internal parts secured properly			
13. Attach all air, vacuum, waste, solvent lines			
14. Attach all power interconnect and Mains power cables.			
15. Insure all Swagelok and poly-flo fittings tightened properly.			
16. Check for correct air output.			
17. Check for leaks in all baths and airlines.			
18. Check for correct vacuum output.			
19. Check Solvent containers and insure solvent lines are plumbed correctly.			

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<u>Procedure</u>	<u>Initials</u>	<u>Date</u>	<u>2nd √ Date if Change A-D</u>
20. Check for solvent leaks.			
21. Current temperature offset entered for _____ °C or °F			
22. Over-temp potentiometer set to _____ °C.			
23. Connect Computer to unit.			
24. Instrument configured as ___ DUAL or ___ SINGLE solvent			
25. VISCPRO software Version _____			

PASS [] FAIL []

The following certified person completed the manufacturer's procedure for the proper Installation Qualification of this instrument:

Name: _____

Title/Affiliation: _____

Signature: _____

Date: _____