



Job Name: _____ **Date:** _____

Job Location: _____

Inspected By: _____

Certified Installer / Project Manager

Door number:					
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General:					
Configuration . SG PR DE MUL					
Handing . LH RH LR RR					
Electric . EUNL ESAF ESEC EPAN					
Comments:					

Frames:					
Anchored Securely					
Grouted					
Plumb					
Comments:					

Tolerances:					
At Hinge Housing Correct					
At Retainer Correct					
At Locking Channel Correct					
Head Strike . PR DE					
Centered					
Orientation Correct					
Latch Stop L55 (Single only)					
In Plane with L11					
Buttons Applied					
Doors in Plane					
Adjustable Tongue Correct (Pair only)					
Comments:					

Operational:					
Closer Properly Adjusted					
Quiet Hinge					
Doors Swing Freely					
Door Latches Properly					
Panic Properly Adjusted					
Lever / Grip Secure					
Application Appropriate					
Comments:					