



	<b>EQUIPMENT QUALIFICATION</b>	<b>Document No.</b>	
	<b>SITE ACCEPTANCE TEST</b>	<b>Revision No.</b>	00
<b>Equipment Name</b>	HEATING, VENTILATION AND AIR CONDITIONING (HVAC)	<b>PAGE No.</b>	1 of 9
<b>Equipment Capacity</b>	CFM		


# SITE ACCEPTANCE TEST

HEATING, VENTILATION AND AIR CONDITIONING (HVAC)

Document Reference: DQ No.: \_\_\_\_\_

Issue Date: \_\_\_\_\_


<b>Prepared by:</b>	<b>Checked by:</b>
<b>Sign. &amp; Date:</b>	<b>Sign. &amp; Date:</b>

	<b>EQUIPMENT QUALIFICATION</b>	<b>Document No.</b>	
	<b>SITE ACCEPTANCE TEST</b>	<b>Revision No.</b>	00
<b>Equipment Name</b>	HEATING, VENTILATION AND AIR CONDITIONING (HVAC)	<b>PAGE No.</b>	2 of 9
<b>Equipment Capacity</b>	CFM		

### CONTENTS

S.No.	Title of sections	Page No.
1.0	Pre-approval	
2.0	Objective	
3.0	Scope	
4.0	Reason for SAT	
5.0	Responsibility	
6.0	Parameter to be met	
7.0	Reference documents	
8.0	Abbreviations	
9.0	Attachments	
10.0	Deviations/ Changes (if any)	
11.0	Recommendations/ Conclusion	
12.0	Post Approval	

<b>Prepared by:</b>	<b>Checked by:</b>
<b>Sign. &amp; Date:</b>	<b>Sign. &amp; Date:</b>

	<b>EQUIPMENT QUALIFICATION</b>	<b>Document No.</b>	
	<b>SITE ACCEPTANCE TEST</b>	<b>Revision No.</b>	00
<b>Equipment Name</b>	HEATING, VENTILATION AND AIR CONDITIONING (HVAC)	<b>PAGE No.</b>	3 of 9
<b>Equipment Capacity</b>	CFM		

**1.0 Pre-approval Protocol:**

This document has been developed and the individuals listed below have reviewed the document and agree with its content and with their signature grant approval for its execution).

Functional area	Name	Designation	Signature	Date
<b>PREPARED BY</b>				
User Department				
<b>REVIEWED BY</b>				
User Dept. Head				
Engineering Dept. Head				
Environment, health and safety				
Quality Control (if applicable)				
Quality Assurance				
<b>APPROVED BY</b>				
QA Head				
Plant Head				

<b>Prepared by:</b>	<b>Checked by:</b>
<b>Sign. &amp; Date:</b>	<b>Sign. &amp; Date:</b>



	<b>EQUIPMENT QUALIFICATION</b>	<b>Document No.</b>	
	<b>SITE ACCEPTANCE TEST</b>	<b>Revision No.</b>	00
<b>Equipment Name</b>	HEATING, VENTILATION AND AIR CONDITIONING (HVAC)	<b>PAGE No.</b>	4 of 9
<b>Equipment Capacity</b>	CFM		

**2.0 OBJECTIVE:** The purpose of site acceptance test is to ensure that all the critical aspects of process / product, cGMP and safety requirement have been considered in installation of and its components are as specifications and as per the approved design at site.

**3.0 SCOPE:** The scope of this Performance Qualification is for “**HVAC System, Capacity: 5000 CFM**” which is installed in the Service floor.


**4.0 Reason for SAT:**

**The reason for preparing this document is:**

Please tick any one (or multiple) option(s) from the following (☑):

- New or refurbished premises/equipment
- Purchase of Utility Systems
- Change in Design of Equipment
- In-Use Systems that don't have a URS
- Others (Specify)

<b>Prepared by:</b>	<b>Checked by:</b>
<b>Sign. &amp; Date:</b>	<b>Sign. &amp; Date:</b>

	<b>EQUIPMENT QUALIFICATION</b>	<b>Document No.</b>	
	<b>SITE ACCEPTANCE TEST</b>	<b>Revision No.</b>	00
<b>Equipment Name</b>	HEATING, VENTILATION AND AIR CONDITIONING (HVAC)	<b>PAGE No.</b>	5 of 9
<b>Equipment Capacity</b>	CFM		

**5.0 Responsibility:** Personnel involved in qualification activity.

Department	Name	Activity
User		To prepare the SAT protocol and verify the equipment and area needs for installation and qualification activities and record.
Engineering		To provide support and perform SAT.
Health Safety and Environment		To verify and monitor the safety aspects.
Validation QA		To be a part of team and review the SAT of HVAC system and documents.
QA Head		To review and approve the Qualification document.
Plant Head		To review and approve the Qualification document.

**6.0 PARAMETERS TO BE MET:**

Item	Acceptance criteria	Observation	Checked By
<b>1.0 Location Suitability</b>			
1.1 Area of installation	In the service floor of Hormone block  Dimension of Area allocated for installation:  _____ mm (L) x _____ mm (B) x _____ mm (H)		

<b>Prepared by:</b>	<b>Checked by:</b>
<b>Sign. &amp; Date:</b>	<b>Sign. &amp; Date:</b>

**EQUIPMENT QUALIFICATION**

Document No.

**SITE ACCEPTANCE TEST**

Revision No.

00

**Equipment Name**HEATING, VENTILATION AND AIR  
CONDITIONING (HVAC)**PAGE No.**

6 of 9

**Equipment Capacity**

CFM

Item	Acceptance criteria	Observation	Checked By
1.2 Area Illumination	Not less than _____ Lux.		
1.3 Equipment Dimensions	_____ mm (L) x _____ mm (B) x _____ mm (H)		
1.4 Weight & Structural suitability	The civil structure should be suitable to occupy the equipment and take the weight load.		
<b>2.0 Utilities</b>			
2.1 Electrical connections	Properly traced connections as per circuit diagram with proper earthing		
2.2 Electrical Supply	Electrical supply three Phase/ 50 Hz with neutral and earthing should be provided.		
2.4 Chilled water Supply	Temperature 5 to 8°C		
2.5 Warm water Supply	Temperature 30 to 40°C		
<b>3.0 Documentation</b>			
3.1 Manuals	Should be provided		
3.2 Certificates/ Drawings/ Test	Should be provided		

**Prepared by:****Checked by:****Sign. & Date:****Sign. & Date:**

**EQUIPMENT QUALIFICATION**

Document No.

**SITE ACCEPTANCE TEST**

Revision No.

00

**Equipment Name**HEATING, VENTILATION AND AIR  
CONDITIONING (HVAC)**PAGE No.**


7 of 9

**Equipment Capacity**

CFM

Item	Acceptance criteria	Observation	Checked By
Reports			

**Prepared by:****Checked by:****Sign. & Date:****Sign. & Date:**

	<b>EQUIPMENT QUALIFICATION</b>	<b>Document No.</b>	
	<b>SITE ACCEPTANCE TEST</b>	<b>Revision No.</b>	00
<b>Equipment Name</b>	HEATING, VENTILATION AND AIR CONDITIONING (HVAC)	<b>PAGE No.</b>	8 of 9
<b>Equipment Capacity</b>	CFM		

**1.0 Reference Documents:** Nil.

**2.0 Abbreviations:** Full forms of all abbreviations are listed here.

<u>Abbreviation</u>	<u>Full form</u>
HZ	: Hertz
ISO	: International Standard Organization
Kg/cm	: Kilogram per centimetre square
No.	: Number
SAT	: Site acceptance test
QA	: Quality Assurance
cGMP	: Current good manufacturing practice
URS	: User Requirement Specification
μ	: Micron
Hz	: Hertz
mm	: Millimetre
L x B x H	: Length x Breadth x Height

**3.0 Attachments:** This section contains a list of all attachments referenced in the protocol.


S.No.	Attachment Details	Attachment No.

**4.0 Deviations/ Changes (if any):**

**5.0 Recommendations/ Conclusion:**

<b>Prepared by:</b>	<b>Checked by:</b>
<b>Sign. &amp; Date:</b>	<b>Sign. &amp; Date:</b>



	<b>EQUIPMENT QUALIFICATION</b>	<b>Document No.</b>	
	<b>SITE ACCEPTANCE TEST</b>	<b>Revision No.</b>	00
<b>Equipment Name</b>	HEATING, VENTILATION AND AIR CONDITIONING (HVAC)	<b>PAGE No.</b>	9 of 9
<b>Equipment Capacity</b>	CFM		

**6.0 Post approval:**

This document has been developed and the individuals listed below have reviewed the document and agree with its content and with their signature grant approval for its execution).

Functional area	Name	Designation	Signature	Date
<b>PERFORMED BY</b>				
User Department				
Engineering				
EHS				
Quality Control (if applicable)				
Validation QA				
<b>REVIEWED BY</b>				
Quality Assurance				
<b>APPROVED BY</b>				
QA Head				
Plant Head				

<b>Prepared by:</b>	<b>Checked by:</b>
<b>Sign. &amp; Date:</b>	<b>Sign. &amp; Date:</b>