

PHARMA DEVILS

QUALITY ASSURANCE DEPARTMENT

Pharma Devila									
Ins	tallation an	d O	peratio	nal Qualification	Test Datas	heet #	03.2 for Infrar	ed Ray Dry	er
Identification			Documer	Document Number:					
Effective Date:					Revision No.: 00				
Test ID : 02					Test Date :				
			Blowe	er -Motor Assembly			ID Number	:	
Parameter Specification		tion	Actual		Verification method (Visual/Document reference)				
Blower-Motor	Assembly								
Make	Accurate								
Blower Housing	SS 304								
Blower CFM	200								
Motor RPM	2800								
Voltage	ge 230 V AC								
Quantity 01 Nos.									
S.No.	-								
Acceptance Criteria			Compliance		Document Reference			Comment Ref. No.	
			Yes/ No/ NA	Document Name/ Type		Document No. &/ or Location			
Component ide	entified by ta	aggii	ng						
Component as shown on P&ID / drawing									
The component	t specificatio	on							

	Compliance	Docun	C	
Acceptance Criteria	Yes/ No/ NA	Document Name/ Type	Document No. &/ or Location	Comment Ref. No.
Component identified by tagging				
Component as shown on P&ID / drawing				
The component specification available				
The component comply design specification				
Contact part made of inert material and conformation document available Material:				
Elastomers used are food grade and conformation document available Material:				
Elastomers are replaceable				
Component intact (no damage)				
Measuring instrument (as applicable) calibrated and calibration certificate available				
Component is suitable for cleaning, operation and maintenance				

Checked By (signature / date)Verified By (signature / date)

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