

File Name

## PHARMA DEVILS

Pharina Devila				QUALITY ASSURA	NCE DEPARTMENT				
	allation and	l O <sub>l</sub>	peratio	onal Qualification	Test Datashee	et #0	03.9 for Infrared Ray Drye	r	
Identification No.: Effective Date:					Document Number: Revision No.: 00				
									Test ID : 09
Name of Comp	onent	:	HM	I			ID Number :		
Parameter	Specification			Actual		Verification method (Visual/Document reference)			
Make	Delta						(	/	
Model									
Serial No.	-								
				Compliance	Do	OC11	ment Reference		
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:			erial						
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 (signatur				ure / date)	V	Verified By (signature / date)			
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