

# COMMISSIONING/HANDOVER CHECKLIST

## ACCESS CONTROL SYSTEM



Customer Name: Viamed Ltd  
Customer Address: 15 Station Road  
Cross Hills  
Keighley  
West Yorkshire  
BD20 7DT  
Telephone Number: 01535 634542

Date: 21/06/2024  
Job Number: -809479  
Contract Number: D21163

Check	Checked    ☐ = Yes
1. Is the wiring correctly terminated?	☐
2. Are supply voltages correct at all appropriate points in the system?	☐
3. Do all locks and closers operate correctly?	☐
4. Do all Readers operate correctly?	☐
5. Has the lock release time been set for each access point?	☐
6. Does the door held open signal operate (if specified)?	☐
7. Have access levels been programmed and verified (where specified)?	☐
8. Does the system operate correctly under mains failure (where specified)?	☐
9. Is the site "As-Fitted" Drawing correct? (arrange amendments with CAD Operator)	☐
10. Is "As-Fitted" Specification correct? (Record variations below in the space provided)	☐

Comments