

CONSTRUCTION COMPLETION CHECKLIST

This checklist is a guide and not intended to be a substitute for MN Rules.

| Requirement | ОК |
|--|----|
| 1. Paving and Landscaping | |
| a. Paving (including hard-surface paving from exits to public way) | |
| b. Landscaping (i.e. sodding/seeding) complete | |
| 2. All doors and door hardware installed | |
| 3. All millwork and hardware installed | |
| 4. Ceilings and wall finishes complete | |
| 5. All floor coverings installed | |
| 6. All handrails installed | |
| 7. All handicapped grab bars installed | |
| 8. All windows and screens installed | |
| 9. Interior finishes – flame spread rating information * | |
| 10. Exit, smoke and corridor doors and door hardware installed | |
| 11. Fire alarm connected to local fire department * | |
| 12. All plumbing fixtures installed and operational | |
| a. Lavatories | |
| b. Water Closets | |
| c. Utility room lavatories/service sinks | |
| d. Piping and equipment disinfected * | |
| 13. Ventilation system installed, tested and operational | |
| a. Supply ducts and diffusers | |
| b. Return and exhaust ducts and diffusers | |
| c. Air Handling Equipment and filters | |
| d. Balancing Report * | |
| e. Duct Smoke Detectors * | |
| 14. Heating system installed, tested and operational | |
| a. Boilers(s) | |
| b. Pumps | |
| c. Distribution piping and baseboard units | |
| d. Thermostats | |
| 15. Electrical system installed, tested and operational | |
| a. Light fixtures in all rooms, corridors, at bed | |
| b. Nurse Call System (with facility approval) * | |
| c. Elevators (controls, key box) | |
| d. Telephones | |
| e. Communication System | |
| f. Emergency Electrical System | |
| g. Exit Lighting | |

| | Requirement | ОК |
|--------|---|----|
| h. | Emergency Generator * | |
| i. | Smoke Detection System * | |
| j. | Fire Alarm System * | |
| k. | Fire alarm signal to fire department * | |
| I. | Room smoke detectors interconnected, with corridor lights and local | |
| | annunciation at the nurse station (MSFC) | |
| 16. Aı | tomatic sprinkler system installed, tested and operation | |
| a. | Flow Alarm * | |
| b. | Valve Supervision * | |
| 17. Fi | ked and movable equipment/furnishings installed | |
| a. | Food Service | |
| b. | Dishwasher | |
| C. | Range Hood | |
| d. | Booster Heater | |
| e. | Grease Filters | |
| f. | Autoclave | |
| g. | Clothes washers and dryers | |
| h. | Washer/Sanitizer | |
| i. | Room Furniture | |
| j. | Privacy Curtains | |
| k. | Automatic gas shutoff valve * | |
| I. | Range hood fire extinguishment system * | |
| m. | Fire Extinguishers * | |
| n. | Flammability Info (window treatments) * | |
| 18. Al | inspections and clearances complete (state and local) | |
| a. | Building Official * | |
| b. | Plumbing Inspector * | |
| C. | Electrical Inspector * | |
| d. | Elevator Inspector * | |
| e. | State Fire Marshal * | |
| 19. Al | tests and certification complete | |
| a. | Plumbing System (backflow preventers) * | |
| b. | Radiation Protection * | |
| c. | Medical Gas System (NFPA 99) * | |
| d. | Bio-med Electrical Systems (NFPA 99) * | |
| | Receptacles, grounding, critical care areas | |
| e. | Automatic Sprinkler System (NFPA 13) * | |
| f. | Smoke/Fire Dampers * | |
| g. | Emergency Power and Lighting System * | |
| h. | 3 rd party testing of penetrations through protected walls * | |