



THE NEW YORK BLOWER COMPANY
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Willowbrook, IL 60527-5530
Visit us on the Web: <http://www.nyb.com>
Phone: (800) 208-7918 Email: nyb@nyb.com

You have indicated that you may have a fan warranty condition. Please inspect the fan and complete this checklist (as completely as possible) before nyb effects or authorizes repairs. Thank you.

MAINTENANCE/SERVICE CHECKLIST

Customer Name:	Customer P.O. Number:
File/Shop Number:	Customer Tag Number :
Fan Type: Size:	Fan User: (If different from customer)
Fan RPM:	Motor RPM:

Perceived problem:

üü CHECK LIST üü

INSTALLATION INFORMATION:

Type of Foundation	Any Grouting? Yes <input type="checkbox"/> No <input type="checkbox"/>	Is mounting surface flat? Yes <input type="checkbox"/> No <input type="checkbox"/>
Is mounting structure adequate? Yes <input type="checkbox"/> No <input type="checkbox"/> Please describe mounting structure		
Any mounting bolts missing? Yes <input type="checkbox"/> No <input type="checkbox"/>	How many?	Where?
Are mounting bolts tight? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Vibration isolators? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, Rubber <input type="checkbox"/> or Spring <input type="checkbox"/>		
Flex connector at Inlet and Outlet Yes <input type="checkbox"/> No <input type="checkbox"/>		
Elbow at inlet? Yes <input type="checkbox"/> No <input type="checkbox"/>	Elbow at outlet? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Comments:		

FAN HOUSING/PEDESTAL INSPECTION:

Any cracked welds? Yes <input type="checkbox"/> No <input type="checkbox"/>	Location	Please attach sketch.
Any loose nuts/bolts? Yes <input type="checkbox"/> No <input type="checkbox"/>	Location	Please attach sketch.
Are there any air leaks? Yes <input type="checkbox"/> No <input type="checkbox"/>	Location	Please attach sketch.
Vibration levels (If available):		
Inboard: Horizontal	Vertical	Axial
Outboard: Horizontal	Vertical	Axial
Have vibration changes been sudden or gradual? (Attach vibration chart if available.)		
Comments:		

WHEEL INSPECTION:

Is wheel free to spin? Yes <input type="checkbox"/> No <input type="checkbox"/>	Is inlet cone/wheel clearance correct? (See I&M Manual) Yes <input type="checkbox"/> No <input type="checkbox"/>
Is rotation correct? Yes <input type="checkbox"/> No <input type="checkbox"/>	Are setscrews tight? Yes <input type="checkbox"/> No <input type="checkbox"/>
Any visible wear/deformation/corrosion? <input type="checkbox"/> Yes <input type="checkbox"/> No	Any cracked welds on wheel? Yes <input type="checkbox"/> No <input type="checkbox"/>
Any material build-up? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Comments:	

BELTS AND SHEAVES INSPECTION:

Are sheaves secured? <input type="checkbox"/> Yes <input type="checkbox"/> No	Sheaves aligned? <input type="checkbox"/> Yes <input type="checkbox"/> No
Belt tension correct? <input type="checkbox"/> Yes <input type="checkbox"/> No	Do belts show signs of wear? <input type="checkbox"/> Yes <input type="checkbox"/> No
Comments:	

MOTOR INFORMATION:

Manufacturer	I.D. #		
Frame Size	RPM	H.P.	Type
Volts/Amps	Power Factor	Efficiency	
Vibration levels (If available): Sheave end: Horizontal Vertical Axial			
Cooler wheel end: Horizontal Vertical Axial			
Comments:			

BEARINGS:

Manufacturer	Bearing type		
Size	Lubrication Grade	Manufacture	Brand name
Proper lubrication level	Yes <input type="checkbox"/> No <input type="checkbox"/>	Condition of bearing	Identify lubrication schedule
Ambient temperatures at bearing pedestal:		Bearing temperature (housing surface): Outboard Inboard	
Does shaft show signs of fretting? <input type="checkbox"/> Yes <input type="checkbox"/> No Setscrews tight? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Are bearings properly aligned? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Comments:			

COUPLING:

Alignment of coupling:		
Top/bottom	Angular	Offset
Side/Side	Angular	Offset
Comments:		

DAMPER:

Is rotation correct? Yes <input type="checkbox"/> No <input type="checkbox"/> (Check via air flow sticker)			
Inlet	<input type="checkbox"/> Yes <input type="checkbox"/> No	Percent pen under normal conditions	%
Outlet	<input type="checkbox"/> Yes <input type="checkbox"/> No	Percent open under normal conditions	%
Does fan or structural vibration change when dampers are opened or closed? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Comments :			

WARRANTY SERVICE

If you still believe that the fan exhibits a defect in materials or workmanship, please forward this document to your local nyb representative. Representative: _____ Phone: _____ Fax: _____

I have read the nyb Maintenance Manual. In addition, I have inspected the "check list" items and corrected potential contributing problems as necessary prior to the service call. Should it be found that the problem is not the result of a defect in fan materials or workmanship, I agree to pay the costs (\$750 per day plus travel expenses) associated with field repairs.

Date:
Customer:
Address:
Signed:
Title: