



# Compressed Air System Inspection Checklist

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## System Overview & Documentation

Initial assessment and verification of system documentation.

**Date of Inspection**

Enter date...

**Time of Inspection**

Enter time...



### System Description (Brief)

Write something...

### System Location(s)

Write something...

### System Pressure (PSI)

Enter a number...

### System Type

- ☐ Rotary Screw
- ☐ Reciprocating
- ☐ Centrifugal
- ☐ Other

### P&ID or System Diagram (if available)

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### Previous Inspection Notes/Recommendations

Write something...

### System Operational Status

- ☐ Operational
- ☐ Degraded
- ☐ Shutdown

## Air Compressors

Inspection of the compressor units themselves, including electrical, mechanical, and performance checks.

### Compressor Operating Pressure (PSI)

Enter a number...

### Compressor Motor Amperage (Amps)

Enter a number...

### **Belt Tension (if applicable - scale of 1-10)**

Enter a number...

### **Compressor Noise Level (Subjective)**

- ☐ Normal
- ☐ Slightly Elevated
- ☐ Excessive

### **Description of any unusual noises or vibrations**

Write something...

### **Oil Level (if applicable)**

- ☐ Full
- ☐ Adequate
- ☐ Low

### **Notes on oil condition (color, clarity)**

Write something...

### Last Oil Change Date

### Photo of Compressor (for reference)

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## Air Receivers (Tanks)

Assessment of the air receiver tank for corrosion, pressure, and safety devices.

### Tank Capacity (Gallons/Liters)

### Working Pressure (PSI/Bar)

**Tank Material (Steel, Stainless Steel, Other)**

- ☐ Steel
- ☐ Stainless Steel
- ☐ Other

**Tank Condition (Excellent, Good, Fair, Poor)**

- ☐ Excellent
- ☐ Good
- ☐ Fair
- ☐ Poor

**Description of any Tank Corrosion or Damage**

Write something...

**Pressure Relief Valve Set Pressure (PSI/Bar)**

Enter a number...

**Last Tank Internal Inspection Date**

Enter date...

### Pressure Relief Valve Test Result (Pass/Fail)

☐ Pass

☐ Fail

### Photos of Tank Condition

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## Air Treatment (Filters, Dryers, Regulators)

Inspection and testing of air treatment components to ensure air quality.

### Inlet Air Pressure (PSI)

Enter a number...

### Outlet Air Pressure (PSI)

Enter a number...

### Pressure Drop Across Filter (PSI)

Enter a number...

### Dryer Humidity (ppm)

Enter a number...

### Filter Condition

- ☐ Excellent
- ☐ Good
- ☐ Fair
- ☐ Poor
- ☐ Needs Replacement

### Dryer Type

- ☐ Refrigerated
- ☐ Desiccant
- ☐ Membrane

### Notes on Dryer Performance (e.g., unusual noises, vibrations)

Write something...

### Regulator Output Pressure Setting (PSI)

### Last Filter Replacement Date

Enter date...

# Air Distribution Piping

Examination of the piping network for leaks, corrosion, and proper support.

## Piping Pressure (PSI)

Enter a number...

## Piping Material Condition (Check all that apply)

- ☐ Good
- ☐ Minor Corrosion
- ☐ Significant Corrosion
- ☐ Damage/Dents
- ☐ No Visible Issues

## Number of Leaks Identified

Enter a number...

## Leak Location Details (if applicable)

Write something...

### Pipe Support Condition

- ☐ Secure
- ☐ Loose
- ☐ Damaged
- ☐ Missing

### Pipe Diameter (inches)

Enter a number...

### Piping Insulation Condition

- ☐ Intact
- ☐ Damaged
- ☐ Missing
- ☐ None

### Any Unusual Noise Observed in Piping?

Write something...

## Pressure Regulation & Control

Verification of pressure regulation and control system functionality.

### System Supply Pressure (PSI)

Enter a number...

### Pressure at Farthest Point (PSI)

Enter a number...

### Pressure Drop Across Regulator (PSI)

Enter a number...

### Regulator Type

- ☐ Direct Acting
- ☐ Pilot Operated
- ☐ Proportional

### Regulator Functioning

- ☐ Operating Normally
- ☐ Hysteresis Present
- ☐ Unstable Output
- ☐ Malfunctioning

### Notes on Regulator Performance

Write something...

### Last Regulator Maintenance Date

Enter date...

### Time of Pressure Readings Taken

Enter time...

## Safety Devices & Interlocks

Assessment of safety devices such as pressure relief valves, alarms, and interlocks.

### Pressure Relief Valve Set Point (PSI)

Enter a number...

### Pressure Relief Valve Test Status

- ☐ Passed
- ☐ Failed
- ☐ Not Tested

### Low Air Pressure Alarm Functionality

- ☐ Functional
- ☐ Not Functional
- ☐ Not Applicable

### High Air Pressure Alarm Functionality

- ☐ Functional
- ☐ Not Functional
- ☐ Not Applicable

### Pressure Relief Valve Discharge Pressure (PSI - if tested)

Enter a number...

### Last Pressure Relief Valve Test Date

Enter date...

### Comments/Observations regarding Safety Devices & Interlocks

Write something...

# Drainage System

Inspection of condensate drain lines and traps.

**Describe the type of drainage system in place (e.g., automatic, manual, Timed)**

Write something...

**Measure drainage line pressure (PSI)**

Enter a number...

**Are drain traps functional and free from blockages?**

☐ Yes

☐ No

☐ N/A

**Identify any observed issues with the drainage system (Select all that apply)**

☐ Leaks

☐ Clogging

☐ Excessive Condensate

☐ Incorrect Trap Operation

☐ None

**Describe any corrective actions taken regarding drainage system issues.**

Write something...

**Date of last drain trap cleaning**

Enter date...

## Electrical Components

Assessment of electrical connections, wiring, and motor condition.

**Compressor Motor Voltage (V)**

Enter a number...

**Compressor Motor Current (A)**

Enter a number...

### Motor Temperature (°C)

Enter a number...

### Motor Condition

- ☐ Excellent
- ☐ Good
- ☐ Fair
- ☐ Poor

### Wiring Condition

- ☐ Excellent
- ☐ Good
- ☐ Fair
- ☐ Poor

### Notes on Electrical Components

Write something...

### Last Electrical Maintenance Date

Enter date...

# Maintenance Records Review

Review of past maintenance records to identify trends and potential issues.

**Last Compressor Oil Change Date**

Enter date...

**Oil Change Interval (Days)**

Enter a number...

**Hours Since Last Filter Replacement**

Enter a number...

**Last System Pressure Test Date**

Enter date...

**Summary of Recent Maintenance Activities (Last 12 Months)**

Write something...

### Are Maintenance Records Complete?

- ☐ Yes
- ☐ No
- ☐ Partially

### Upload a copy of the Maintenance Schedule

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### Total Downtime Hours (Past Year)

Enter a number...