

Post Installation Checklist

Installer: Complete this checklist at the conclusion of the installation. When completed, ask the Store Manager or On-Site Representative to sign and date. Return to regional staff within 48 hours.

Customer/Brand Name:	Technician ID:	YES or NO	Closing Code:
Address:			
Task		(✓)	Comments
Installer Verifies All System Components in Pick List are on site. (call 877-495-1634 if parts missing)			
New wired pulled YES or NO - reason:			
Speaker mounted facing ground or at 90 degrees if possible (away from car)			
Microphone facing towards car, 18" away from speaker if possible			
All connections soldered and all end wires tinned with dolphins used			
Menu Board Loop Detector Wired, set between 4 to 6, and tested - 10 Cars Minimum			
Tested loop with voltmeter (write results in comments)			
All Wireless Headsets Tested and Fully Operational with no echo			
Base Station in Approved Location and Fully Operational- (<i>Strain relief installed</i>)			
Headset Rack and Battery Charger mounted on wall in Approved Location			
Loop Installation Saw Cut (<i>if Applicable</i>) is Water-Sealed and Cosmetically Acceptable			
Digital Photos of Loop Detector Wiring and mounting, Base Station Wiring and mounting, Speaker and Mic positioning, Battery Charger, operational timer, timer wiring and interconnect module			
Indicate if Message Repeater (<i>Greeter</i>) is being used			
System Mode Setting: Hands Free / Auto Hands Free / Push to Talk			
Timer integrated with base station, greet time functional - (DIP Switch #6 is ON) • In comments, identify brand - Hyperactive, ERC, etc.			
Volume Settings: Inbound _____ Grill Speaker _____ Outbound Day _____ Outbound Night _____			
Quick Start Guide used for Training			
Attendee / Title: _____ Attendee / Title: _____			
Attendee / Title: _____ Attendee / Title: _____			
If old system was removed it was given to (name)			
The above checklist is filled out completely and correctly.			
Installer Signature	Installer Printed Name	Date	

My new SpeedThru system installation is complete and is operating to my satisfaction:

Customer Signature _____ Customer Printed Name _____ Date _____

Please Fax to 888-354-2837 or scan and email to: service@wentworthtechnology.com

Please send photos to (207) 468-0559 or email to: service@wentworthtechnology.com

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