

Safe System of Work

Use of Test Tank

Name: Training Date:.....

	Instructions	Understood ✓ Or X
1	Returned pumps are delivered to the warehouse and then moved directly to the department.	
2	Returned pumps are stored in the department in a specified location.	
3	Returned pumps must be air tested following the pump pressure testing procedure before being water tested.	
4	Follow manual handling procedures to safely move the pump to the test area.	
5	Position the pump on the appropriate side of the test tank. <ul style="list-style-type: none"> AG pumps are tested on the left-hand side. AV pumps are tested on the right-hand side. 	
6	Connect the pump using pipe 1 and 2.	
7	Wire the pump. <ul style="list-style-type: none"> AG pumps will need to be wired to a standard UK plug. AV pumps will need to be wired directly from the wall to the motor. 	
8	Remove the lid from the main pump body, fill with water, then replace the lid.	
9	Connect the plug to the mains power, switch on and leave to run for 30 minutes. <ul style="list-style-type: none"> Periodically check for leaks whilst the pump is running. 	
11	Switch off mains power and remove the plug.	
12	Unwire the pump. <ul style="list-style-type: none"> AG pumps will need to have the standard UK plug removed. AV pumps will need the cables disconnected from the motor itself. 	
13	<ul style="list-style-type: none"> Loosen the connector for pipe 1 slightly to release the pressure and drain the excess water. (You should hear a light hiss/bubbling sound) 	
14	Fully disconnect pipe 1 and 2.	
15	Remove the lid from the main body, carefully pour the remaining water from the pump into the tank, then replace the lid.	
16	Move pump back to specified return's location making sure to follow safe manual handling procedures.	

I have received the above training and fully understand every point that was explained to me. I confirm that I will wear the required PPE equipment when using the above machinery and take all steps to ensure my own safety. I will ask for further training if I need to and will immediately inform the Supervisor or Manager if there are any issues with the machinery.

Name:

Signed: Date:.....

I confirm that I have trained the aforementioned person and that they fully understand how to use the above mask, have received the required PPE equipment and know to inform me immediately of any issues with the equipment or if they require further training. I authorise this person to use the equipment detailed above.

Name:(Authorised Trainer)

Signed Date: