

Gridsmart FIELD AUDIT CHECKLIST

Intersection Name: _____
 City, State / Agency: _____

Auditor Name: _____
 Date: _____

IN THE CABINET

Gridsmart Processor installed to spec?	<input type="checkbox"/> Yes <input type="checkbox"/> No
- Cabinet grounded, 25 Ohms or less resistance to ground	<input type="checkbox"/> Yes <input type="checkbox"/> No
- EPM / Fiber Media Converter installed and properly grounded	<input type="checkbox"/> Yes <input type="checkbox"/> No
- Drain wire connected (Ethernet Only)	<input type="checkbox"/> Yes <input type="checkbox"/> No
- Processor plugged in to Protected/Filtered outlet (not GFCI)	<input type="checkbox"/> Yes <input type="checkbox"/> No

Comments: _____

CAMERAS

Gridsmart Cameras installed to spec?	<input type="checkbox"/> Yes <input type="checkbox"/> No
- Cable Type (shielded, gel-flooded, burial grade) Cable Length < 300' (between Repeaters) or < 2k feet w/ Fiber	<input type="checkbox"/> Yes <input type="checkbox"/> No
- Bell camera location (>35' height, <75' to center, <150' to stopbar)	<input type="checkbox"/> Yes <input type="checkbox"/> No
- Leveled, Clean Lens, Minimal Occlusions, "G" orientation, etc.	<input type="checkbox"/> Yes <input type="checkbox"/> No
- Mounting Structure grounded, 25 Ohms or less resistance to ground	<input type="checkbox"/> Yes <input type="checkbox"/> No
- Camera Mount grounded (bonded to Mounting Structure)	<input type="checkbox"/> Yes <input type="checkbox"/> No

Comments _____

SITE CONFIGURATION

Is the site configured correctly?	<input type="checkbox"/> Yes <input type="checkbox"/> No
- Latest Gridsmart software version installed – App and Firmware	<input type="checkbox"/> Yes <input type="checkbox"/> No
- Zones configured correctly – phases, turn type, flow vector, etc.	<input type="checkbox"/> Yes <input type="checkbox"/> No
- Road and Object Masks used correctly	<input type="checkbox"/> Yes <input type="checkbox"/> No
- Network Settings configured correctly	<input type="checkbox"/> Yes <input type="checkbox"/> No
- Correct Camera Settings – North Heading, Height, etc.	<input type="checkbox"/> Yes <input type="checkbox"/> No
- Correct Site Settings – Lat/Long, Control type, etc.	<input type="checkbox"/> Yes <input type="checkbox"/> No

Comments _____

Auditor Comments