



# UPF FOREIGN MATERIAL EXCLUSION CHECKLIST

Work Package No: \_\_\_\_\_

Task No.: \_\_\_\_\_

<b>DMC NO.</b>		<b>DATE:</b>	
<b>PROJECT NO.:</b>		<b>EQUIPMENT NO. / AREA:</b>	
<b>SYSTEM CLEANLINESS CLASS / HOUSEKEEPING ZONE CLASSIFICATIONS:</b> (Check Applicable Box)			
<input type="checkbox"/> Class A <input type="checkbox"/> Class B <input type="checkbox"/> Class C <input type="checkbox"/> Class D <input type="checkbox"/> N/A (Elect)			
<input type="checkbox"/> <b>ZONE I</b> <ul style="list-style-type: none"> <li>• See Section 5.10 "Restriction List"</li> </ul>	<input type="checkbox"/> <b>ZONE II</b> <ul style="list-style-type: none"> <li>• Post all entrances.</li> <li>• Clean gloves, shoe and head covers.</li> <li>• Use of PMTL Log.</li> <li>• No tobacco or eating.</li> </ul>	<input type="checkbox"/> <b>ZONE III</b> <ul style="list-style-type: none"> <li>• Post all entrances.</li> <li>• Use of PMTL Log.</li> <li>• No tobacco or eating.</li> </ul>	<input type="checkbox"/> <b>ZONE IV</b> <ul style="list-style-type: none"> <li>• No tobacco or eating.</li> </ul>
<b>ADDITIONAL REQUIREMENTS:</b>			
<b>FE / DATE:</b>		<b>PFE REVIEW / DATE:</b>	
<b>MATERIAL ACCOUNTABILITY REQUIREMENTS (Supv. / Lead):</b>			
<input type="checkbox"/> Final Cleanliness Inspection <input type="checkbox"/> Control Access to Work Area <input type="checkbox"/> Install Plugs / Covers <input type="checkbox"/> Flush System / Component		<input type="checkbox"/> Use Personnel, Tool, and Material Log <input type="checkbox"/> Secure Tools / Materials <input type="checkbox"/> Items Not Allowed (List Below) <input type="checkbox"/> Access Control Monitor <input type="checkbox"/> FME Plan Required	
<b>ADDITIONAL REQUIREMENTS (Supv. / Lead):</b>			
<b>CLOSEOUT INSPECTION COMPLETED (QCE):</b>			
INSPECTED BY: _____		DATE: _____	
<b>COMMENTS:</b>			