

## **Pre-Certification Checklist**

A Pre-Certification Checklist must be completed for all analyzers requiring activation and signed by an authorized service technician prior to requesting a certification audit.

Station ID	Station Name
GAS ID	
Analyzer Serial Number	Analyzer Model Number
Station and analyzer numbers have been en	ntered.
State VID phone number has been entered	
Analyzer has current software.	
A successful OBDII operator training test	has been performed.
Analyzer has current OBDII firmware vers	sion.
Analyzer has current VRT version.	
Analyzer has the required zero and high ca	alibration gas and these gases have not expired.
Analyzer has been initialized and has succ	essfully completed all re-cycle procedures.
I certify all of the above items have been completed	d.
Technician	Date
Signature	