GROUNDING AND BONDING CONNECTION CHECKLIST FOR EXISTING FACILITIES

For use of this form, see TM 5-690; the proponent agency is COE.

1. FACILITY

2. DATE *(YYYYMMDD)*

3. LOCATION

4. INSPECTOR

5. GENERAL CONDITION

☐ EXCELLENT ☐ GOOD ☐ POOR ☐ UNACCEPTABLE

6. SPECIFIC DEFICIENCIES

LOCATION	DEFICIENCIES

7. RESISTANCE *(Use double balanced dc bridge or approved bond resistance meter and identify those bonds whose resistance is greater than 1.0 milli-ohm)*

LOCATION	DEFICIENCIES

8. INEFFECTIVE BONDING JUMPERS

LOCATION	MATERIAL	LENGTH	SIZE	DEFICIENCIES