72 Beadel Street Brooklyn, NY 11222





(Full warranty does not apply)

## SMOKEHOUSE - STARTUP AND MAINTENCE

BEFORE STARTUP, UNIT(S) MUST HAVE THE GAS CONNECTED, BEEN LIT OFF, BEEN PRESSURE TESTED AND CORRECT MANIFOLD PRESSURE CONFIRMED (AS REQUIRED BY THE NATIONAL FUEL GAS CODE). UNIT(S) MUST BE APPROVED FOR OPERATION BY THE LOCAL GOVERNING AUTHORITY. THESE REQUIREMENTS ARE THE SOLE RESPONSIBILITY OF THE DEALER AND/OR INSTALLER. ALL LOCAL CODES MUST ALSO BE MET BY THE DEALER/INSTALLER.

STARTUP IS TO BE PERFORMED BY A LICENSED PLUMBER FAMILIAR WITH THE SUBJECT EQUIPMENT AND HAZARDS INVOLVED. THIS DOCUMENT DOES NOT CLAIM TO COVER ALL POSSIBLE SCENARIOS OR ISSUES THAT MAY BE ENCOUNTERED. THE DOCUMENT IS INFORMATIONAL ONLY. IT DOES NOT RELIEVE THE QUALIFIED PERSON FROM EXERCISING GOOD JUDGEMENT.

## CALL TOWN AT 718-388-5680 WITH QUESTIONS OR IF DISCREPANCIES ARE FOUND

THE TOWN SM SERIES SMOKEHOUSES ARE LISTED AND TESTED FOR INDOOR USAGE UNDENEATH A HOOD. IT HAS NOT BEEN DESIGNED OR TESTED FOR OUTDOOR USAGE, MOBILE TRUCK USAGE, OR WITH A DIRECT VENT.

LISTED OPERATIING PRESSURE IS 6" W.C. FOR NAT GAS AND 10" W.C. FOR LP GAS. REMOVE BOTTOM CONTROL PANEL TO REVEAL THE 1/8" NPT TEST TAP. PRESSURE SHOULD BE TAKEN WITH OTHER GAS EQUIPMENT ON.

Manifold Pressure (no burners on)	inches water column
Manifold Pressure (with all burners on)	inches water column
Was other gas fired equipment in	
operation when readings were taken?	

Town's universal (applicable for Natural and Propane) appliance regulator is stamped with item # 246047. The maximum inlet pressure to this regulator is 15" water column. If inlet pressure is greater than this (such as from an LP tank) a 1st stage regulator must be installed upstream of the wok appliance regulator. This is to be supplied and installed by others.

Is the correct Town appliance gas pressure regulator installed? Is a first stage pressure regulator required and installed?	□ YES □ NO □ YES □ NO		
Visually inspect the mechanical connections & lines. Note any issues	s and actions taken to correct them.		
Is the cuttoff valve for the gas installed within 6 feet of the range?  Is a drip leg installed on the gas line?	☐ YES ☐ NO ☐ YES ☐ NO		

						The pilot flame should hit the top 3/8 see the supplied owner's manual. Cyc					
					- 41 -	d button is depressed and relight whe					
	eased.	. Thoe burner s	nould drop	out w		button is depressed and rengite wife					
		et thermostat	to 300 des	rees.	Flame sl	should be mainly blue, slight yellow	or				
	ange tipping is OK. Adjust or										
	Ensure pilot runner flame ru					urner tubes.					
☐ Check entire unit for gas leaks. Tighten all unions.											
☐ Cycle brass gas valve on and off for proper operation. Verify that burners shut off and pilot remains li											
	Check operation of thermos	tat- proper on/o	off and con	nplete s	hutoff.	. Calibrate if necessary. If needed, co	ntact				
To	wn for instructions. Temp rea	adings should b	e taken ne	xt to th	e therm	nostat bulb on the right side.					
	Unit should be level from le	ft to right and f	ront to bac	k. Bulle	et feet ir	in legs can be used to make adjustme	nts.				
	If the unit is on casters, are					☐ YES ☐ NO					
	If the unit is on casters, is a	W //	_ ///			☐ YES ☐ NO					
						er whenever the unit is operating.					
	Ensure that the safety grate										
	Is the unit installed indoors?		□ Y		□ NO						
	Is the unit installed underne	ath a hood?	O Y	ES [	□ NO						
		JIHAK	DIKL	(1)	W						
	0	MA	INTENAI	NCE N	OTES						
1	Class wilet orifice and vilet		2			Month					
1. 2.	Clean pilot orifice and pilot Gas valves bonnets should be										
2. 3.		/ \		_		ure to do so may lead to grease fires!					
4.	174 4 2 0		Y / 15/4 PK			n same direction that grain runs in.					
5.		-				(249006), safety valve repair kit					
	19009 for LP gas).										
	MEDITA	-				7170)					
	Town model #	SAUKY	///// T	own se	rial #						
	Restaurant Name		$\mathbf{A}$	<u>"</u>	M	70					
	210				-						
	Restaurant Address				T						
	/	0740			. 5						
	Name	Date	<del>}}</del>		Signatu	ure					
	Service Agency Name										
	Service Agency Nume										
	Name	Date			Signatu	ure					