

RESIDENTIAL START UP SHEET

RETURN TO TECH SERVICE DEPARTMENT

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INSPECTION INFORMATION

Dealer Name: _____ Service Tech _____
Job Name _____ Location _____
Inspection Date _____ Inspection Time _____
Primary Complaint _____

EQUIPMENT INFORMATION

Indoor Model # _____ Indoor Serial # _____
Outdoor Model # _____ Outdoor Serial # _____
Install Date _____ Air Filter Size _____
Duct System Return Size _____ Duct System Supply Size _____
Supply Static Press _____ Return Static _____
Supply Air Dry Bulb _____ Return Air Dry Bulb _____
Supply Air Wet Bulb _____ Return Air Wet Bulb _____

HEAT PUMP

AIR CONDITIONER

GAS

GEO THERMAL

R22 R410A

Suction PSI _____
Liquid PSI _____
Discharge Temp _____
Liquid Temp _____
Ambient Temp _____
Voltage _____
Lineset Length _____
Compressor Amps _____
Defrost Test Good Bad

R22 R410A

Suction PSI _____
Discharge PSI _____
Superheat _____
Subcool _____
Liquid Line Size _____
Suction Line Size _____
Lineset Length _____
Voltage _____
Compressor Amps _____

NG LP

Incoming Pressure _____
Manifold Pressure _____
Venting Size _____
90's _____
Venting Length _____
Return Air Temp _____
Supply Air Temp _____
Gas Line Size _____
Gas Line Length _____

R22 R410A

Loop Open Closed
Water Pressure In _____
Water Pressure Out _____
Water Out Temp _____
Water In Temp _____
Superheat _____
Subcool _____
Return Air Temp _____
Supply Air Temp _____

Special Jobsite Notes _____

HVAC Technician Findings _____

Technician Signature: _____ Customer Signature _____

QUESTIONS? CALL US AT 800-228-4822 x5 OR EMAIL TECHSUPPORT@HVACDIST.COM