

Site Information

Job #: _____

Rater: _____

Date: _____

Builder: _____

Subdivision: _____

City: _____

Super: _____

Phone #: _____

Lot #: _____

Address: _____

Plan: _____

SF: _____ Stories: _____

DT: ☐ DT LTO: ☐ QII: ☐

AF: ☐ RCM: ☐ BD: ☐

FW: ☐ Ver. DD: ☐ Solar: ☐

IAQ: ☐ DCS: ☐

Testing Equipment Info**Manometer**

Make: _____
Model: _____
Serial: _____

Flow Hood

Make: _____
Model: _____
Serial: _____

Flow Grid

Make: _____
Model: _____
Serial: _____

Blower Door Fan

Make: _____
Model: _____
Serial: _____

RCM Gauges

Make: _____
Model: _____
Serial: _____

Heating System

Make: _____

Matches

Model: _____

Serial #: _____

Efficiency: _____ Btu/hr: _____

Indoor Cooling Coil

Make: _____

Matches

Model: _____

Serial #: _____

Outdoor Cooling Condenser

Make: _____

Matches

Model: _____

Serial #: _____

SEER: _____ Tonnage: _____

Water Heater

Make: _____

Matches

Model: _____

Duct Leakage Verification

Cooling: Duct Location: _____

Heating: Duct R-Value: _____

	Target CFM	Measured CFM
Airflow: <input type="text"/>	<input type="text"/>	<input type="text"/>

Results:

HVAC System Info

Zoned System?

Bypass Duct?

Zone #: _____

Var Speed
Compressor

Duct Leakage to Outside

Target CFM	Measured CFM
<input type="text"/>	<input type="text"/>

Results:

Airflow Verification

Probe:

HSPP

PSPP

Tool:

Hood

Grid

Plenum
Pressure

Target CFM

All Zones:

Measured CFM

ZONED SYSTEM NEED RESULTS FOR EACH ZONE

Zone 1: Measured CFM

Zone 2: Measured CFM

Location: _____

Location: _____

Zone 3: Measured CFM

Zone 4: Measured CFM

Location: _____

Location: _____

Results:

Pass

N.C.

N/A

Fan Watt Verification

Tool:

Watt
Meter

Analog
Util Mtr

Digital
Util Mtr

Target Watts

All Zones:

Measured Watts

ZONED SYSTEM NEED RESULTS FOR EACH ZONE

Zone 1: Measured Watts

Zone 2: Measured Watts

Location: _____

Location: _____

Zone 3: Measured Watts

Zone 4: Measured Watts

Location: _____

Location: _____

Results:

Pass

N.C.

N/A

IAQ Fan Verification

Fan Type: _____

Schedule: _____

Fan Count: _____

Fan ON Time: _____

Location: _____

Target CFM

All Fans:

Measured CFM

MORE THAN 1 FAN USED, NEED CFM FOR EACH FAN

Fan 1: Measured CFM

Fan 2: Measured CFM

Location: _____

Location: _____

Fan 3: Measured CFM

Fan 4: Measured CFM

Location: _____

Location: _____

Results:

Pass

N.C.

N/A

Refrigerant Charge Verification

TMAH Present

TXV Present

Return DB: _____

Return WB: _____

Cond DB: _____

Supply DB: _____

Liquid Temp: _____

Suction Temp: _____

Liquid Pres: _____

Suction Pres: _____

Cond Sat: _____

Evap Sat: _____

Target SC

Measured SC

Target SH

Measured SH

Results:

Refrigerant Weight In Verification

Cond DB: _____

Manf. Default

Installed

Charge: _____ lbs _____ oz

Line Diam: _____ in

_____ in

Line Lgth: _____ ft

_____ ft

Coil Size _____ tons

_____ tons

Target

Verified

Adjustment: _____ lbs _____ oz

_____ lbs _____ oz

ENTER NEGATIVE NUMBERS FOR REMOVAL OF REFRIGERENT

Results:

Pass

N.C.

N/A

Verified Duct Credits**Ducts Located in Conditioned Space**

Results:

Pass

N.C.

Verified Duct Design

Refer to duct layout drawings and verify insulation follows designs

Results:

Pass

N.C.

Buried Ducts

Results:

Pass

N.C.

Deeply Buried Ducts

Results:

Pass

N.C.

Notes