

Residential Start-Up Report

Job Name: _____

Start-Up Date: _____

Address: _____

City: _____ State: _____

Start-Up Contractor: _____

On Site Technician: _____

Model No: _____

Serial No: _____

Inspections and Checks

Verify Wiring Type Is Correct. ☐

Verify Electrical Connections. ☐

Idle Supply Volts: _____

Idle Supply 24 Volts: _____

Altitude: _____

Correct Pressure Switch? ☐

Correct Orifices? Nat or LP _____

Cooling Checks: AC _____ and HP _____ (Please Check One)

Refrigerant Type _____

Outside Air Temp.: _____

Compressor Amps: _____

Compressor Volts: _____

Notes: _____

Condenser Fan Amps: _____

Blower Motor Amps: _____

Supply Air Temp.: _____

Return Air Temp.: _____

Refrigerant Checks: AC _____ and HP _____ (Please Check One)

****HP Use TRUE Suction Port****

Liquid Pressure: _____ Suction Pressure _____

Superheat _____

Liquid Temperature: _____ Suction Temperature _____

Subcooling _____

Additional Lineset Length: _____

Additional Charge: _____

Notes: _____

Gas Heating Check

Outside Air Temp.: _____

Return Air Temp.: _____

Supply Air Temp.: _____

***** Natural Gas Altitude Derate 4% For Every 1000' Over 4500' *****

Gas Valve

Manifold Pressure

Low Fire

High Fire

Blower Motor Amps: _____

Fuel Type: Natural or Propane? _____

Inlet Gas Pressure: _____ in. w.c.

Notes: _____

Electric Heating Check

Outside Air Temp.: _____

Return Air Temp.: _____

Supply Air Temp.: _____

Blower Amps: _____

Heat Strip Voltage: _____

Voltage

Amps

Circuit 1:

Circuit 2:

Circuit 3:

Notes: _____

Commercial Start-Up Report

Job Name: _____
Start-Up Date: _____
Address: _____
City: _____ State: _____
Start-Up Contractor: _____
Technician: _____
Model No.: _____
Serial No.: _____
RTU No.: _____ Catalog No.: _____

Inspections and Checks

Check Electrical Connections. Tighten If Necessary.

Supply Voltage L1-L2 _____ L2-L3 _____ L2-L3 _____

If Unit Contains a 208-230/240 Volt Transformer:

Check Primary Transformer Tap ☐

Transformer Secondary Voltage: _____

Job Site Altitude: _____

Cooling Checks

Compressor Rotation ☐ Ambient Temp _____ Return Temp _____ Supply Air Temp _____

S t g	Compressor Amps			Compressor Volts			Pressures		Condenser Fan Amps			CC Heater Amps
	L1	L2	L3	L1	L2	L3	Disch.	Suction	L1	L2	L3	L1
1												
2												
3												
4												

Blower Checks

Pulley/Belt Alignment ☐ Blower Rotation ☐
Set Screws Tight ☐ Belt Tension ☐

Name Plate Amps _____ Volts _____

Motor Amps _____ Volts _____
L1 _____ L1-L2 _____
L2 _____ L1-L3 _____
L3 _____ L2-L3 _____

Heating Checks - Electrical

Return Air Temp.: _____ Supply Air Temp.: _____

Limits Operate? ☐

	Amps		
	L1	L2	L3
1			
2			
3			
4			

Heating Checks - Gas

Fuel Type? Nat. ☐ LP ☐ Inlet Pressure: _____ in w.c.

Return Air Temp: _____ Supply Air Temp: _____

Altitude: _____ Primary Limits Operate? ☐

CO2%

Gas Valve	Manifold Pressure	
	Low Fire	High Fire
GV1		
GV2		

Accessory Checks

Power Exhaust Amps

1 _____ 2 _____ None ☐

Economizer Operation

Min. Pos. Set? ☐ Motor Travel Full Open/Close ☐

Control Type

Notes

LG Start-Up Sheet

Service Worksheet

IDU Set Temp: _____

Indoor Air Temp: _____

Mode	15 Minute Runtime			30 Minute Runtime		
DC Link Voltage						
AC Voltage						
AC Current (Amp Draw)						
ODU Fan RPM						
Condenser HEX Temp						
Compressor Discharge Temp.						
Compressor Frequency (Hz)						
Single Zone - EEV Pulse						
Single Zone - ODU Pipe In/Out	°F	°F	°F	°F	°F	°F
Single Zone - IDU Mid/In/Out Temps	°F	°F	°F	°F	°F	°F

**** Multi Zone ****

EEV#	Zone -					
EEV#	Zone -					
EEV#	Zone -					
EEV#	Zone -					
IDU#	Pipe In/Pipe Out	°F	°F	Δ°F	°F	°F Δ°F
IDU#	Pipe In/Pipe Out	°F	°F	Δ°F	°F	°F Δ°F
IDU#	Pipe In/Pipe Out	°F	°F	Δ°F	°F	°F Δ°F
IDU#	Pipe In/Pipe Out	°F	°F	Δ°F	°F	°F Δ°F

Additional Information:

S/A Temp.:	°F	°F
R/A Temp.:	°F	°F
Outdoor Air Temp.:	°F	

S/A Temp.:	°F	°F
R/A Temp.:	°F	°F

Notes: _____