



Air Source Unitary Heat Pump System Readiness Checklist

Equipment ID	[Equipment ID]
Building	[Building]
Location	[Room]

Statement of Readiness

The above equipment and/or systems integral to them are complete and ready for functional testing, except as noted. None of the outstanding items preclude safe and reliable functional tests being performed. This checklist does not take the place of the manufacturer's recommended checkout and startup procedures or report.

Responsible Contractor Signatures

CONTRACTOR	PRINTED NAME	INITIALS	DATE
General Contractor (GC)			
Mechanical Contractor (MC)			
Electrical Contractor (EC)			
TAB Contractor (TAB)			
Controls Contractor (CC)			

This statement of readiness has been received by the Commissioning Agent on _____ and will be incorporated as part of the final commissioning report.

Equipment Information

Make		Model Number	
Serial Number		Supply Fan HP	
Supply CFM		Exhaust CFM	
Sensible Cooling Capacity (MBh)		Total Cooling Capacity (MBh)	
Heating Capacity (MBh)		Auxiliary Electric Heating Capacity (MBh)	
Recovery Heating Capacity (MBh)		Recovery Cooling Capacity (MBh)	
Notes:			



System Readiness Checklist

Yes = Checked and Completed, N/A = Not Applicable

General Installation					
Description	Yes	N/A	Initials	Date	Comments
General appearance good with no apparent damage or dirtiness.	<input type="checkbox"/>	<input type="checkbox"/>			
Permanent labels affixed per specification.	<input type="checkbox"/>	<input type="checkbox"/>			
Installation per manufacturer's instructions and the construction documents.	<input type="checkbox"/>	<input type="checkbox"/>			
Casing condition good: no dents, no leaks, door gaskets installed, free of dirt and debris.	<input type="checkbox"/>	<input type="checkbox"/>			
Access doors close tightly - no leaks.	<input type="checkbox"/>	<input type="checkbox"/>			
Maintenance access acceptable for unit and components. Meets unit manufacturer's minimum requirements.	<input type="checkbox"/>	<input type="checkbox"/>			
Thermal insulation properly installed and in accordance with contract documents.	<input type="checkbox"/>	<input type="checkbox"/>			
Fans and motor lube lines installed and accessible	<input type="checkbox"/>	<input type="checkbox"/>			
Fans, motors and linkages lubricated.	<input type="checkbox"/>	<input type="checkbox"/>			
Fan and motor alignment correct.	<input type="checkbox"/>	<input type="checkbox"/>			
Supply fan belt is properly tensioned and in good condition.	<input type="checkbox"/>	<input type="checkbox"/>			
Bird screen installed at exhaust outlet.	<input type="checkbox"/>	<input type="checkbox"/>			
Mountings checked per design detail - unit is secure and mounted level.	<input type="checkbox"/>	<input type="checkbox"/>			
Electric heating is functional and installed properly.	<input type="checkbox"/>	<input type="checkbox"/>			
Unit has proper refrigerant level.	<input type="checkbox"/>	<input type="checkbox"/>			
Unit has proper oil levels.	<input type="checkbox"/>	<input type="checkbox"/>			
Oil heater installed properly.	<input type="checkbox"/>	<input type="checkbox"/>			
Oil filter clean.	<input type="checkbox"/>	<input type="checkbox"/>			
Refrigerant circuit evacuated before being filled.	<input type="checkbox"/>	<input type="checkbox"/>			
Refrigerant piping has been pressure tested with no leaks found.	<input type="checkbox"/>	<input type="checkbox"/>			
Connection between duct and unit tight and in good condition.	<input type="checkbox"/>	<input type="checkbox"/>			
All dampers and actuators installed.	<input type="checkbox"/>	<input type="checkbox"/>			
All dampers close tightly and open fully without binding.					
Smoke and fire dampers installed properly per contract docs (proper location, access doors, appropriate ratings verified).	<input type="checkbox"/>	<input type="checkbox"/>			
Balancing dampers installed as per drawings.	<input type="checkbox"/>	<input type="checkbox"/>			
Construction filters replaced.	<input type="checkbox"/>	<input type="checkbox"/>			
Correct filters installed per requirements and clean.	<input type="checkbox"/>	<input type="checkbox"/>			
Duct pressure leakage tests completed.	<input type="checkbox"/>	<input type="checkbox"/>			
Ductwork is free of dust and debris.	<input type="checkbox"/>	<input type="checkbox"/>			



General Installation					
Description	Yes	N/A	Initials	Date	Comments
Cleanup of equipment completed per contract documents.	<input type="checkbox"/>	<input type="checkbox"/>			
Notes:					

Valves, Piping and Coils					
Description	Yes	N/A	Initials	Date	Comments
Pipe fittings complete and pipes properly supported per design detail.	<input type="checkbox"/>	<input type="checkbox"/>			
Refrigerant piping is properly insulated in accordance with contract documents.	<input type="checkbox"/>	<input type="checkbox"/>			
No leaking apparent around fittings (refrigerant and condensate).	<input type="checkbox"/>	<input type="checkbox"/>			
All coils are clean, fins are undamaged and in good condition.	<input type="checkbox"/>	<input type="checkbox"/>			
Control valves close tightly and open fully.					
Coil drain has been piped to closest storm drain pipe, rain gutter or floor drain as specified on drawings.	<input type="checkbox"/>	<input type="checkbox"/>			
Condensate and storm drain piping connection has been made correctly per design detail (if applicable).	<input type="checkbox"/>	<input type="checkbox"/>			
Condensate drain piping has been routed in accordance to design detail.	<input type="checkbox"/>	<input type="checkbox"/>			
Condensate drain line is clean and free of debris.	<input type="checkbox"/>	<input type="checkbox"/>			
System flushing complete and strainers/dryers installed and clean.	<input type="checkbox"/>	<input type="checkbox"/>			
Refrigerant dryers installed as required.	<input type="checkbox"/>	<input type="checkbox"/>			
Line set installed and leak tested.	<input type="checkbox"/>	<input type="checkbox"/>			
Notes:					

Electrical and Controls					
Description	Yes	N/A	Initials	Date	Comments
Power disconnects located within sight of the unit it controls and is properly labeled.	<input type="checkbox"/>	<input type="checkbox"/>			
All electrical wiring complete, connections tight and properly installed.	<input type="checkbox"/>	<input type="checkbox"/>			
Grounding installed for components and unit.	<input type="checkbox"/>	<input type="checkbox"/>			
VFD fully installed and programmed per construction documents and manufacturer's recommendations.	<input type="checkbox"/>	<input type="checkbox"/>			
Drive min speed set to ____ Hz.	<input type="checkbox"/>	<input type="checkbox"/>			
If control signal lost, VFD is set to ____ Hz.	<input type="checkbox"/>	<input type="checkbox"/>			
Safeties installed and operational.	<input type="checkbox"/>	<input type="checkbox"/>			



Electrical and Controls					
Description	Yes	N/A	Initials	Date	Comments
Starter overload breakers installed and correct size.	<input type="checkbox"/>	<input type="checkbox"/>			
All control sensors installed per manufacturer's recommendations.	<input type="checkbox"/>	<input type="checkbox"/>			
All control devices, wiring and programming installed and functional per construction documents.	<input type="checkbox"/>	<input type="checkbox"/>			
Control system interlocks connected, programmed and functional.	<input type="checkbox"/>	<input type="checkbox"/>			
Unit is programmed with full written programming record on site.	<input type="checkbox"/>	<input type="checkbox"/>			
The Hand-Off-Auto (HOA) switch properly operates the unit.	<input type="checkbox"/>	<input type="checkbox"/>			
Motor safeties in place and operable.	<input type="checkbox"/>	<input type="checkbox"/>			
Trend logs available for verification testing.	<input type="checkbox"/>	<input type="checkbox"/>			
Manual control and set point override available.	<input type="checkbox"/>	<input type="checkbox"/>			
Notes:					

TAB					
Description	Yes	N/A	Initials	Date	Comments
Installation of system and balancing devices is completed following NEBB or AABC procedures and contract documents.	<input type="checkbox"/>	<input type="checkbox"/>			
Air test and balance complete for the entire AHU system.	<input type="checkbox"/>	<input type="checkbox"/>			
Preliminary TAB report provided to CxA.	<input type="checkbox"/>	<input type="checkbox"/>			
Notes:					

Operational Checks					
Description	Yes	N/A	Initials	Date	Comments
Supply fan rotation correct.	<input type="checkbox"/>	<input type="checkbox"/>			
No unusual noise or vibration during operation.	<input type="checkbox"/>	<input type="checkbox"/>			
Specified point-to-point checks have been completed and documentation record submitted for this system.	<input type="checkbox"/>	<input type="checkbox"/>			
Trend logs available for functional testing.	<input type="checkbox"/>	<input type="checkbox"/>			
Condensate drain and pump operation has been verified per manufacturer's installation instructions.	<input type="checkbox"/>	<input type="checkbox"/>			



Operational Checks					
Description	Yes	N/A	Initials	Date	Comments
Heating stages verified.	<input type="checkbox"/>	<input type="checkbox"/>			
Cooling stages verified.	<input type="checkbox"/>	<input type="checkbox"/>			
Electrical and control interlocks verified.	<input type="checkbox"/>	<input type="checkbox"/>			
Capacity controls verified.	<input type="checkbox"/>	<input type="checkbox"/>			
Motor amps/voltage verified and accurate.	<input type="checkbox"/>	<input type="checkbox"/>			
Integral and safety controls verified.	<input type="checkbox"/>	<input type="checkbox"/>			
Notes:					

Additional Comments:

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