HEAT PUMP JOBSITE INFORMATION SHEET

OWNER:
Name:
Address:
City: Zip:
State/Province: Phone:

SERVICING CONTRACTOR:
Name:
Street:
City: Zip:
State/Province: Phone:
Contact:

DATE REQUIRED:

REQUESTOR:

DISTRIBUTOR:
Name:
Street:
City: Zip:
State/Province:
Phone:
Contact:

TYPE OF REFRIGERANT:

OUTDOOR UNIT
Model #: Serial #: Date Installed:

EVAPORATOR
Model #: Serial #: Date Installed:

AIR HANDLER
Model #: Serial #: Date Installed:

FURNACE
Model #: Serial #: Date Installed:

THERMOSTAT:
Model #: Serial #: Date Installed:

AIRFLOW ORIENTATION: UF: LF: RF: DF:

PROBLEM SUMMARY:

ADDITIONAL INFORMATION:

TWO-STAGE UNIT COMPRESSOR/ DC VOLTAGE READING AT UNLOADER SOLENOID

REQUIRED ADDITIONAL INFORMATION

New Line Set ☐ Yes ☐ No

☐ Extra refrigerant charge added:

☐ Noises: When/Where/Video

HEAT PUMP JOBSITE INFORMATION SHEET

REMEMBER:

1. Check Metering device used.
2. Check Yes or No at drier loacations.
3. Check Service Ports used.
4. Sat. Temp. is pressure converted to Temp?

IF 2-STAGE, CHARGE IN HIGH SPEED

Check One

- ☐ Heat Mode
- ☐ Cool Mode

Low PSIG: ____ # — Saturation Temp. ____

High PSIG: ____ # — Saturation Temp. ____

FORMULA FOR SUPER HEAT

____	Vapor Line Temp.
– ____	Minus Sat Temp.
____	Equals Super Heat

FORMULA FOR SUB COOLING

____	Sat Temp.
– ____	Minus Liquid Line Temp.
____	Equals Sub Cooling

Indoor Temp. Leaving
DB: ____
WB: ____

INDOOR COIL

OUTDOOR COIL

Liquid Line Temp. ____
Liquid Line Temp. ____
Liquid Line Temp. ____

LIQUID LINE

Metering Device ☐ TXV ☐ EEV

Drier
- ☐ Yes
- ☐ No

Service Port

Metering Device ☐ TXV ☐ EEV

Vapor Line Temp. ____
Vapor Line Temp. ____
Vapor Line Temp. ____

VAPOR LINE

Service Port
Service Port

Outdoor Temp. ____

Indoor Temp. Entering
DB: ____
WB: ____

Drain Trap ☐ Yes ☐ No

STATIC PRESSURE READINGS

BLOWER TAPS IF RH2T

○ T5 ○ T4 ○ T3 ○ T2 ○ T1

SUPPLY ESP: ____
RETURN ESP: ____
TOTAL ESP: ____

Reversing Valve

Compressor
VOLTS: ____
AMPS/OHMS:
C: ____
S: ____
R: ____

Hot Gas Line Temp. ____

Vapor Line Temp. ____

Accumulator

NOTE: An outdoor ambient temperature between 40°F and 50°F for heat mode and above 80°F for cool mode is recommended for completion of this sheet.

ADDITIONAL INFORMATION

1. Liquid Line Size: ____
2. Liquid line Length Vertical/Horizontal: ____
3. Vapor Line Size: ____
4. Vapor Line Length: Vertical/Horizontal: ____
5. Vertical Separation Below/Above: ____
6. Air Handler CFM: ____ Method Used for CFM: ____