

HEAT PUMP JOBSITE INFORMATION SHEET

◇ OWNER:

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

◇ DATE REQUESTED: _____

◇ REQUESTOR:

◇ DISTRIBUTOR:

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

◇ SERVICING CONTRACTOR:

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

◇ EQUIPMENT DATA:

OUTDOOR UNIT

Model #: _____ Serial #: _____ Date Installed: _____

EVAPORATOR

Model #: _____ Serial #: _____ Date Installed: _____

AIR HANDLER

Model #: _____ Serial #: _____ Date Installed: _____

FURNACE

Model #: _____ Serial #: _____ Date Installed: _____

❖ AIRFLOW ORIENTATION: UF: _____ LF: _____ RF: _____ DF: _____

◇ PROBLEM SUMMARY:

◇ CORRECTIVE ACTIONS TAKEN:

◇ ADDITIONAL INFORMATION:

❖ REQUIRED ADDITIONAL INVERTER INFORMATION

- Software (SW) version of all equipment (Last two digits of SW # found on Econet Service Screen)
 - Econet: _____ Air Handler/ Furnace: _____ OD Unit: _____
- Screen shots of all Econet settings
- Extra refrigerant charge added: _____
- Current Faults from Econet: _____
- Alarm History from Econet: _____
- Noises: When/ Where/ Video



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REMEMBER:

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

Circle One

Heat Mode
Cool Mode

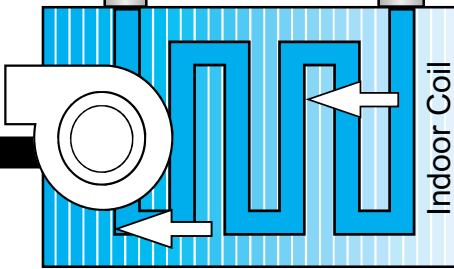
Low PSIG

Saturation Temp. #

High PSIG

Saturation Temp. #

Inside Temp. Leaving
DB: _____
WB: _____



Inside Temp. Entering
DB: _____
WB: _____

Formula For Super Heat

Vapor Line Temp. _____

Minus Sat Temp. _____

Equals Super Heat _____

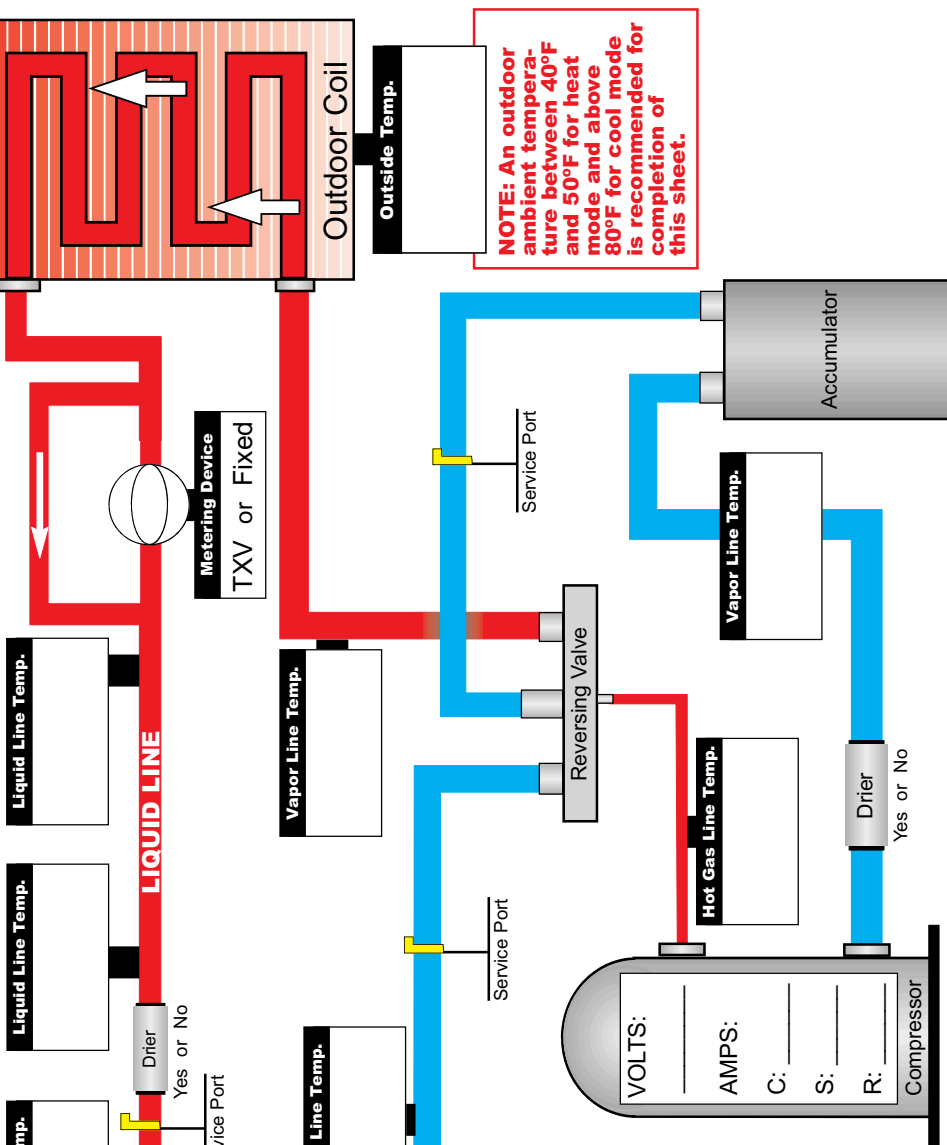
Formula For Sub Cooling

Sat Temp. _____

Minus Liquid Line Temp. _____

Equals Sub Cooling _____

CHARGE IN HIGH SPEED



STATIC PRESSURE READINGS

SUPPLY ESP: _____

RETURN ESP: _____

TOTAL ESP: _____

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: _____

VOLTS: _____

AMPS: _____

C: _____

S: _____

R: _____

Compressor