

Direct expansion: Commissioning – Multi Split

Installer	General info
Company name <input style="width: 90%;" type="text"/>	<input type="checkbox"/> One time inspection <input type="checkbox"/> Contractual inspection
Contact person <input style="width: 90%;" type="text"/>	

End customer	Performed by
Name <input style="width: 90%;" type="text"/>	Company <input style="width: 90%;" type="text"/>
Street – N° <input style="width: 90%;" type="text"/>	Technician <input style="width: 90%;" type="text"/>
Zip code – City <input style="width: 90%;" type="text"/>	Certificate <input style="width: 90%;" type="text"/>
Country <input style="width: 90%;" type="text"/>	Date <input style="width: 90%;" type="text"/>

Installation					
Model name <input style="width: 90%;" type="text"/>			Controls <input style="width: 90%;" type="text"/>		
Serial number <input style="width: 90%;" type="text"/>			Refrigerant type <input style="width: 15%;" type="text"/>	Standard weight <input style="width: 15%;" type="text"/>	kg
Construction year <input style="width: 90%;" type="text"/>				Additional weight <input style="width: 15%;" type="text"/>	kg
Reference installation <input style="width: 90%;" type="text"/>					
Number of indoor units <input style="width: 90%;" type="text"/>				Total weight <input style="width: 15%;" type="text"/>	kg
	Indoor unit 1	Indoor unit 2	Indoor unit 3	Indoor unit 4	Indoor unit 5
Unit model <input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>
Serial number <input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>

Safety / last minute risk analysis					
Safe access to the installation	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Other safety hazards	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Enclosed workplace	<input type="checkbox"/> No	<input type="checkbox"/> Yes	Emergency exits	<input type="checkbox"/> OK	<input type="checkbox"/> Not OK
Working at heights	<input type="checkbox"/> No	<input type="checkbox"/> Yes	Presence of necessary personal protection equipment	<input type="checkbox"/> OK	<input type="checkbox"/> Not OK
Electrical hazards	<input type="checkbox"/> No	<input type="checkbox"/> Yes	Any refrigerant leakage?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
			Both stop valves are open before operation?	<input type="checkbox"/> No	<input type="checkbox"/> Yes

Visual inspection					
General state	<input type="checkbox"/> OK	<input type="checkbox"/> Not OK	Position of sensors	<input type="checkbox"/> OK	<input type="checkbox"/> Not OK
Corrosion/oxidation	<input type="checkbox"/> OK	<input type="checkbox"/> Not OK	Logbook available and complete?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Vibrations/frictions	<input type="checkbox"/> OK	<input type="checkbox"/> Not OK	Unit grounded?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Noise	<input type="checkbox"/> OK	<input type="checkbox"/> Not OK	Presence of installation mistakes	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Sales selection data available?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Airco energy audit requested?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Communication bus	<input type="checkbox"/> OK	<input type="checkbox"/> Not OK	Condenser with glycol	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Piping length within limits	<input type="checkbox"/> OK	<input type="checkbox"/> Not OK	PCB state	<input type="checkbox"/> OK	<input type="checkbox"/> Not OK
				<input type="checkbox"/> Not applicable	
Drainage bottom plate	<input type="checkbox"/> OK	<input type="checkbox"/> Not OK	Piping insulation state	<input type="checkbox"/> OK	<input type="checkbox"/> Not OK
	<input type="checkbox"/> Not applicable			<input type="checkbox"/> Not applicable	

Electrical system

Main voltage

V

Isolating switch

OK Not OK

Fuse

OK Not OK

Cable section

OK Not OK

Indoor unit

	Indoor unit 1	Indoor unit 2	Indoor unit 3	Indoor unit 4	Indoor unit 5
Inlet air temperature	°C				
Outlet air temperature	°C				
Heat exchanger temperature	°C				
Fan state	<input type="checkbox"/> OK <input type="checkbox"/> Not OK	<input type="checkbox"/> OK <input type="checkbox"/> Not OK	<input type="checkbox"/> OK <input type="checkbox"/> Not OK	<input type="checkbox"/> OK <input type="checkbox"/> Not OK	<input type="checkbox"/> OK <input type="checkbox"/> Not OK
WLAN adaptor connection (if applicable)	<input type="checkbox"/> OK <input type="checkbox"/> Not OK	<input type="checkbox"/> OK <input type="checkbox"/> Not OK	<input type="checkbox"/> OK <input type="checkbox"/> Not OK	<input type="checkbox"/> OK <input type="checkbox"/> Not OK	<input type="checkbox"/> OK <input type="checkbox"/> Not OK

Outdoor unit

Inlet air temperature	°C	Fan state	<input type="checkbox"/> OK <input type="checkbox"/> Not OK
Outlet air temperature	°C		
Heat exchanger temperature	°C		

Operation check

	Indoor unit 1	Indoor unit 2	Indoor unit 3	Indoor unit 4	Indoor unit 5
Operation mode					
Set temperature	°C				
Room thermistor	°C				
Indoor heat exchanger thermistor	°C				
Gas pipe thermistor	°C				
Liquid pipe thermistor	°C				

Gas pipe pressure °C Liquid pipe pressure °C

If in cooling mode

	Indoor unit 1	Indoor unit 2	Indoor unit 3	Indoor unit 4	Indoor unit 5
Gas pipe thermistor (operating in multi)	°C				

If in heating mode

	Indoor unit 1	Indoor unit 2	Indoor unit 3	Indoor unit 4	Indoor unit 5
Indoor heat exchanger temperature	°C				
Liquid pipe temperature	°C				
Subcooling	K				

Discharge pipe thermistor bar Outdoor heat exchanger thermistor bar

Compressor data	L1 (A)	L2 (A)	L3 (A)	Abnormal noise
Are there any error codes?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, write down the error codes		<input type="checkbox"/> No <input type="checkbox"/> Yes

Electrical checks

Electrical connections	<input type="checkbox"/> OK <input type="checkbox"/> Not OK	Contactors contacts	<input type="checkbox"/> OK <input type="checkbox"/> Not OK
	Compressor	Electrical insulation	Winding resistance
	<input type="checkbox"/> OK <input type="checkbox"/> Not OK	<input type="checkbox"/> OK <input type="checkbox"/> Not OK	<input type="checkbox"/> OK <input type="checkbox"/> Not OK

Overall result

The installation is working:

- Good
- Safe

- Not good
- Not safe

Follow-up site visit needed?

- Yes
- No

Shortcomings and measures to be taken

General remarks:

Shortcomings that were not fixed during the commissioning:

Measures to be taken in order to resolve the remaining shortcomings:

Signature certified technician