



Certificate of Good Operating Condition

Unit Model #: \_\_\_\_\_ Unit Serial #: \_\_\_\_\_

Owner of Equipment: \_\_\_\_\_ Owner Phone #: \_\_\_\_\_

Owner Address: \_\_\_\_\_

Installing HVAC Contractor Name: \_\_\_\_\_

Installing HVAC Contractor Company Name: \_\_\_\_\_

Installing HVAC Contractor Phone #: \_\_\_\_\_

Installing HVAC Contractor License #: \_\_\_\_\_

**VOLTAGE**

Incoming Voltage (three phase units): L1-L2 \_\_\_\_\_ L1-L3 \_\_\_\_\_ L2-L3 \_\_\_\_\_

Compressor Voltage (three phase units): L1-L2 \_\_\_\_\_ L1-L3 \_\_\_\_\_ L2-L3 \_\_\_\_\_

Incoming Voltage (Single phase units): L1-L2 \_\_\_\_\_ Running Voltage: L1-L2 \_\_\_\_\_

Secondary Voltage: \_\_\_\_\_ R to G Volts\* \_\_\_\_\_ R to Y1\* Volts\* \_\_\_\_\_ R to W1\* Volts \_\_\_\_\_

\*With thermostat calling

**AMPERAGE**

Unit Fans: Rated Amps \_\_\_\_\_ Running Amps motor #1 \_\_\_\_\_ Running Amps motor#2 \_\_\_\_\_

Evaporator Motor: Nominal HP: \_\_\_\_\_ Rated Amps: \_\_\_\_\_ Running Amps: \_\_\_\_\_

**AIRFLOW**

Design CFM: \_\_\_\_\_ Dry Coil Pressure Drop: \_\_\_\_\_ Calculated CFM: \_\_\_\_\_

**REFRIGERATION**

System #1: Suction Pressure: \_\_\_\_\_ Suction Temperature: \_\_\_\_\_ Superheat: \_\_\_\_\_

Discharge Pressure: \_\_\_\_\_ Discharge Temperature: \_\_\_\_\_ Subcooling: \_\_\_\_\_

System #2: Suction Pressure: \_\_\_\_\_ Suction Temperature: \_\_\_\_\_ Superheat: \_\_\_\_\_

Discharge Pressure: \_\_\_\_\_ Discharge Temperature: \_\_\_\_\_ Subcooling: \_\_\_\_\_

Ambient temperature before COLD-PLUS: \_\_\_\_\_ Ambient Temperature after COLD-PLUS: \_\_\_\_\_

**Installer Signature:** \_\_\_\_\_ **date:** \_\_\_\_\_

Comments on Condition: (rating 1 2 3 4 5 6 7 8 9 10)

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