

Appendix V: Startup

Commissioning Report (G i b D i a d)

1. Customer Informations	
Full name	
Address	
City	
Commission date Installation	Year: Month: Day: New: () Retrofit ()

2. Contractor Informations	
Company's name	
Name of the technician (made the Installation)	
Telephone	

3. Startup procedure after 3 minutes power ON	
a) model number of the indoor unit	
MACHR	
Real condition when making the startup procedure	
Outdoor temperature	
Indoor temperature	
Ajustement of flow switch	
b) Heating Mode	
Discharge temperature (1)	
High pressure (2)	
Low pressure (3)	
Inlet water temperature	
Outlet water temperature	
Amperage of compressor	
c) Cooling mode	
Discharge temperature (1)	
High pressure (2)	
Low pressure (3)	
Inlet water temperature	
Outlet water temperature	
Amperage of compressor	

4. Description of the installation	
a) Estimated Heat Loss/Gain BTU/ft2 or W/m2:	SunPump Capacity kW:
b) Building total floor area:	Number of Occupants:
c) Gas tube O.D: () 3/8", () 1/2", () 5/8"	Liquid tube O.D. () 1/4", () 3/8"
d) Tube Run Distance from SunPump to Panels Manifold:	Panels face: W. SW. S. SE. E.
e) Vertical Height from SunPump to Roof Flashing:	Heat Source:
f) Type of roof covering: () Asphalt Shingles, () Metal,	() Other:
g) Purposes: () DHW, () Floor Heating, () Cooling,	() Other:
h) Distribution system: () Water, () Air - details:	
i)	

5. Technician signature: _____ Date : _____

email scan as PDF to: admin@solar-hot-water.ca Please include any panel and indoor pictures.