



CUSTOMER & JOB INFORMATION			
Company:		Date:	
Address:		Tech Name:	
		License #:	
Contact:		Job Number:	

CRAC			
Unit Location:		Serial No.:	
Make:		Model:	
Notes:			

EVAP/BLOWER SECTION	RESULTS	COMMENTS
CHECK FILTER CONDITION AND/OR CHECK PRESSURE DROP		
CHECK EVAP COIL CONDITION/CLEANLINESS		
CHECK BELT TENSION/CONDITION		
CHECK PULLEY/SHEAVE CONDITION/ALIGNMENT		
CHECK BLOWER MOTOR & ASSEMBLY CONDITION/OPERATION		
CHECK ALL BEARINGS & GREASE AS NEEDED		
TEST AIRFLOW ALARM/FAN SAFETY SWITCH		
CHECK CONDENSATE DRAIN PIPING & PUMP		
TEST FOR WATER ALARM AND ANY LEAK DETECTION DEVICES OR PAN SAFETY SWITCHES		

COMPRESSOR/REFRIGERATION SECTION	RESULTS	COMMENTS
CHECK MOUNTING SPRINGS/BOLTS		
CHECK OIL LEVEL		
CHECK FOR SIGNS OF OIL INDICATING LEAKS		
CYCLE ON ALL COMPRESSORS AND CHECK OPERATION		
CHECK SIGHT GLASS FOR MOISTURE/FLASHING		
ENSURE PROPER REFRIGERANT CHARGE		
CHECK HOT GAS BYPASS VALVE		
CHECK PRESSURE SAFETY SWITCHES		

ELECTRICAL/HUMIDIFIER SECTION	RESULTS	COMMENTS
CHECK ELECTRICAL WIRING AND CONNECTIONS		
TIGHTEN ELECTRICAL CONNECTIONS AS NEEDED		
CHECK ALL CONTACTORS, RELAYS & SWITCHES		
CHECK CONTROLLERS OPERATION AND CYCLE ON COMPONENTS AND RECORD AMPERAGES		
ENSURE ALL COMPONENTS ARE OPERATING WITHIN NORMAL OPERATING FLA RANGE		
CHECK OPERATION OF REHEATS (FIRE SYSTEM IN TEST)		
CHECK HUMIDIFIER CANISTER/ELEMENTS CONDITION		



CHECK HUMIDIFIER SAFETIES		
CHECK CONTROL TRANSFORMER/S TO ENSURE PRIMARY SIDE IS TAPPED FOR THE PROPER INCOMING SUPPLY VOLTAGE.		

CONDENSER SECTION	RESULTS	COMMENTS
CHECK ALL PIPING AND CONNECTIONS/FITTINGS FOR SIGNS OF OIL LEAKS		
CLEAN STRAINERS		
CHECK ALL HEAD PRESSURE CONTROL DEVICES		

CHILLED WATER/FREE COOLING WATER COIL & ACTUATOR SECTION	RESULTS	COMMENTS
CHECK CHILLED WATER/FREE COOLING COIL & PIPING FOR SIGNS OF LEAKS		
CHECK PIPING INSULATION CONDITION		
CHECK ACTUATOR MOTOR OPERATION		
CHECK VALVE OPERATION		
CHECK EWT/LWT TEMP SENSORS, CALIBRATE AS NEEDED		

ADDITIONAL NOTES/COMMENTS

DEFICIENCIES		
Severity	Description of the issue	Take a picture of the issue

CLOSING			
Date & Time Complete:			
Customer Name:		Technician Name:	
Customer Signature:		Technician Signature:	