

Statewide Heat Pump Program

Air-Source Heat Pump

Commissioning Checklist



Participating Contractor:	
Site Owner Name:	Account #:
Manufacturer:	Model #:
Manufacturer:	Model #:
Manufacturer:	Model #:
Manufacturer:	Model #:

Heat Load Served by ASHP (Check only one)

- ASHP project serves Full Load Heating (90% and 120% of design heating load)
- ASHP project serves Partial Load Heating

I attest that I have used the following tools to calculate the home's heating and cooling loads: (select all that apply)
 ACCA Manual J ACCA Manual S ACCA Manual D Code Approved Equivalent

Installer to complete. Check Done or N/A Column. Fill in blanks. Installer to sign.

Done	N/A	Item Description
Heat Pump Units		
<input type="checkbox"/>	<input type="checkbox"/>	Outdoor unit height above grade (inches) to avoid snow line: _____.
<input type="checkbox"/>	<input type="checkbox"/>	Outdoor unit is under roof drip line and is protected by ice/snow shield.
<input type="checkbox"/>	<input type="checkbox"/>	Outdoor unit was measured to be level and is fastened to structure or mechanical pad.
<input type="checkbox"/>	<input type="checkbox"/>	Outdoor unit has unobstructed airflow as required by manufacturer.
<input type="checkbox"/>	<input type="checkbox"/>	Indoor unit has clearance for service and operation as required by manufacturer.
<input type="checkbox"/>	<input type="checkbox"/>	Indoor unit is properly located, properly fastened to structure, and is level.
<input type="checkbox"/>	<input type="checkbox"/>	Condensate line is supported approximately 4 feet, is pitched to outlet, and drains water.
Line Set		
		Diameter of line set _____
		Minimum line set length per manufacturer _____ Maximum Length _____
		Maximum line set length permitted by manufacturer for factory charge _____
		Maximum line set vertical difference per manufacturer _____
		Installed line set length _____ Installed vertical difference _____
<input type="checkbox"/>	<input type="checkbox"/>	Line set length exceeds manufacturer's requirements for factory charge
		Refrigerant added: Pounds _____ Ounces _____
<input type="checkbox"/>	<input type="checkbox"/>	Line set purged with N ₂ ; Pressure tested with N ₂ ; Evacuated to 250 _{µm} or per manufacturer.
		N ₂ test pressure (PSIG) _____ Test duration (minutes) _____
		Vacuum Level (µm) _____ Vacuum duration (minutes) _____
<input type="checkbox"/>	<input type="checkbox"/>	Brazing joint(s) was required. N ₂ purge used during brazing operations.
<input type="checkbox"/>	<input type="checkbox"/>	Flare connection tightened per mfg.'s recommended torque. Torque setting _____
<input type="checkbox"/>	<input type="checkbox"/>	Line sets and units were sensed with refrigerant detector and no leaks were found.
<input type="checkbox"/>	<input type="checkbox"/>	Insulation completely covers line sets. Insulation UV protection provided exterior of building.
<input type="checkbox"/>	<input type="checkbox"/>	Floor/Wall/Ceiling pipe penetrations are sealed.

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Done	N/A	Item Description
Operation/Controls		
<input type="checkbox"/>	<input type="checkbox"/>	Unit(s) were operated in heating and cooling modes to verify proper operation.
<input type="checkbox"/>	<input type="checkbox"/>	Continuous fan function disabled.
<input type="checkbox"/>	<input type="checkbox"/>	If installed, the dual fuel outdoor cutoff control is functioning as designed to optimize use of ASHP for heating.
Ducted Units		
		Design airflow _____ Design discharge static pressure _____
		Measured airflow _____ Measured static pressure _____
<input type="checkbox"/>	<input type="checkbox"/>	Ducts were sized to ACCA Manual D or equivalent.
<input type="checkbox"/>	<input type="checkbox"/>	Ducts are sealed, and no leaks are evident.
<input type="checkbox"/>	<input type="checkbox"/>	Any ducts outside condition space are insulated. Please refer to IECC/IRC sections R403.3.1, R403.3.2, and R402.4.1.1 for industry standards.
Information to Site Owner		
<input type="checkbox"/>	<input type="checkbox"/>	I have provided an Owner's Manual for the Heat Pump to the Site Owner.
<input type="checkbox"/>	<input type="checkbox"/>	I showed the Site Owner how to control the Heat Pump including turning on and off, adjust the temperature, and switch between heating and cooling, I explained preventive maintenance requirements including how to clean and/or change the filter. I showed the Site Owner what alarms look like when the heat pump is not functioning properly.
<input type="checkbox"/>	<input type="checkbox"/>	I provided the Warranty to the Site Owner. The Site Owner understands who to contact for service.
<input type="checkbox"/>	<input type="checkbox"/>	I have informed the Site Owner that I am a participating contractor in the NYS Clean Heat Statewide Heat Pump Program and therefore a Quality Assurance field inspection of the installed Heat Pump may be conducted.
<input type="checkbox"/>	<input type="checkbox"/>	When applicable, the Site Owner's Invoice demonstrates the incentive amount(s) being passed onto them.
Installer Signature:		Date:
Installer Name:		