

<b>Customer Information</b>	
Name:	
Address:	
City, State, Zip Code:	
Phone:	
Scheduled Time/Date:	

<b>System Info</b>			
<b>Furnace Make:</b>	<b>Furnace Model #:</b>	<b>Furnace Serial #:</b>	
<b>Efficiency Estimate:</b> 80% 90% Below Current Minimum Standard	<b>General Appearance:</b> Neglected Average Good New		
<b>Ignition Type:</b> Hot Surface Carbide Hot Surface Nitride Direct Spark Intermittent Spark Standing Pilot			
<b>Furnace Control:</b> Honeywell UTEC White-Rodgers Texas Instruments Robertshaw Other	<b>Fuel Type:</b> Natural LP		
<b>Heating Stages:</b> Base 1 2 Stage Better 3 or Modulating Premium	<b>Thermostat Make:</b>		
<b>Type:</b> Energy Saving Electronic Non-Energy Saving Electronic Mechanical	<b>Air Filter Type:</b> Standard Pleated Electronic Electrostatic		
<b>Size:</b>	<b>Brand:</b>	<b>Installing Company (If Known):</b>	
<b>Estimated Age:</b>	<b>Cooling System Make:</b>	<b>System:</b> Matched Mismatched	<b>Tons:</b>

<b>Nameplate Data</b>			
<b>BTUH Input:</b>	<b>BTUH Output:</b>	<b>Temp. Rise Range ( °F):</b>	<b>Main Air Limit Setting ( °F):</b>
<b>If Applicable: Aux Limit Setting (°F):</b>	<b>Input Fuel Pressure Min ("w.c.):</b>	<b>Input Fuel Pressure Max ("w.c.):</b>	
<b>Required Manifold Pressure ("w.c.):</b>	<b>Maximum External Static Pressure in Heating Mode ("w.c.):</b>		

<b>Combustion Air Audit</b>		
<b>Total BTUH Gas Input to All Applications in Space:</b>	<b>Room Size:</b>	<b>Room Height:</b>
<b>Installation Correct:</b> Yes No	<b>If No, Problem:</b>	<b>Required Change:</b>

<b>Prepurge Period</b>		
<b>80% Efficient Models</b>		
<b>Motor Condition:</b> Good Fair Poor (Oil if Possible)	<b>Inner Housing and Wheel Condition:</b> Good Fair Poor	<b>Check Pressure Switch Tubing for Cracks:</b> OK Needs Replacing
<b>Flue Condition:</b> Good Needs Replacing Problem:	<b>Pressure Switch Have Shorted Prior to Induced Draft Motor Operation Safety:</b> Yes No	
<b>Pressure Switch Safety Check: Switch Closes @ _____ "w.c. Within Specs?:</b> Yes No	<b>Conditions Requiring Repair:</b>	
<b>90% Efficient Models</b>		
<b>Model Type:</b> Non-Direct Vent Direct Vent	<b>Pipe Size:</b>	<b>Estimated Pipe Length (ft):</b>
<b>Piping Visual Inspection:</b> OK If not, Problem:	<b>Condensate Drain:</b> OK If not, Problem:	<b>Inducer Motor Type:</b> Variable Speed PSC Shaded Pole
<b>Motor Condition:</b> Good Fair Poor (Oil if Possible)	<b>Tubing Condition:</b> Good Needs Replacing	<b>Pressure Switch Have Shorted Prior to Induced Draft Motor Operation:</b> Yes No
<b>Pressure Switch Safety Check: Switch Closes @ _____ "w.c. Within Specs?:</b> Yes No	<b>Conditions Requiring Repair:</b>	
<b>Low Efficiency Models Below Current 80% Efficiency</b>		
<b>Inspect Flue Piping:</b> OK Needs Repair If so, Problem:	<b>Draft Hood Condition:</b> Good Fair Poor	<b>Draft Hood Limit:</b> OK Needs Replacing If so, Problem

<b>Igniter Warm Up Period</b>		
<b>Hot Surface Igniter</b>	<b>Intermittent Pilot Type</b>	<b>Direct Spark Type</b>
<b>Igniter Type:</b> Carbide Nitride Line Voltage Type Nitride Variable Voltage Type	<b>Pilot Gas Pressure:</b> OK Adjusted	<b>Igniter Assembly Condition:</b> OK Needs Replacing If so, Problem:
<b>If Carbide Type:</b> Can/Can't be upgraded to Nitride	<b>Pilot Assembly Condition:</b> OK Needs Replacing If so, Problem:	<b>Igniter Wire Condition:</b> OK Needs Replacing If so, Problem
<b>Visual Line Inspection:</b> OK If not, Problem:	<b>Flame Current Level (DCuA):</b> _____ <b>Required for Flame Proving (DCuA):</b> _____	<b>Spark Signal Strength:</b> OK Needs Replacing Adjusted Electrode Gap
<b>Nitride Line Voltage Type Ohms:</b>	<b>Ground Area:</b> OK Needs Correction If so, Problem:	<b>Pilot Type</b>
<b>Nitride Variable Type Ohms:</b>	<b>If Pilot Switch:</b> OK Needs Correction If so, Problem:	<b>Pilot Gas Pressure:</b> OK Adjusted
<b>Nitride Variable Voltage Type Neutral to Ground Voltage @ IFC Board:</b> _____ VAC	<b>Smart Valve Type</b>	<b>Pilot Assembly Condition:</b> OK Needs Replacing/Problem:
<b>Replacement Carbide Model#:</b>		<b>Thermocouple Replaced:</b> Yes No

<b>Heat Exchanger Test</b>		
OK Needs Replacing If so, Problem:		

<b>Trial for Ignition Period</b>		
<b>Gas Valve Manufacturer:</b>	<b>Gas Valve Model #:</b>	<b>Fuel:</b> Natural LP
<b>Gas Pressure Inlet ("w.c.):</b>	<b>Gas Pressure Manifold ("w.c.):</b>	<b>2nd Stage ("w.c.):</b>
<b>Burners:</b> OK Needs Cleaning Needs Replacing Problem:		<b>Supply Air CO Level:</b>

<b>Flame Detect Period</b>		
<b>Type:</b> Radiant Sense Flame Rod Rectification	<b>Radiant Sensor Type:</b> OK Needs Replacing If so, Problem:	<b>Flame Rod:</b> OK Needs Replacing If so, Problem:
<b>Flame Current Before Rod Cleaned (DCuA):</b>		<b>After Cleaning (DCuA):</b>

<b>Blowers On Period</b>		
<b>Motor Type:</b> ECM High Efficiency Constant Torque Type PSC Type	<b>Blower Wheel:</b> OK Needs Replacing Problem:	
<b>Main Air Limit Test:</b> OK Limit Bad Problem:	<b>E.S.P. Reading Heating Speed ("w.c.):</b>	
<b>Cooling Speed ("w.c.):</b>	<b>CFM Cooling Speed (CFM):</b>	<b>Required (CFM):</b>
<b>Proper Range for Cooling System:</b> Yes No	<b>Air System Within Nameplate Requirements for Heat Operation?:</b> Yes No	<b>Air System Within Cooling System Requirements?:</b> Yes No
<b>Furnace System Operating at Nameplate Required Levels for: Temperature, Gas Pressure, Limit Operation, Air Volume?:</b> Yes No		

**Waiver Information**  
By denying service, I acknowledge that I and/or any person(s) on my property will not hold the technician and/or their parent company responsible for any bodily harm or damage to my/their property that may be caused by voluntarily denying service to the inspected device/machine/system.

<b>Customer Signature:</b>	<b>Date</b>	<b>Technician Signature:</b>	<b>Date</b>
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<b>Service Agreement</b>				
<b>Customer Signature</b>	<b>Print</b>	<b>Date</b>	<b>Technician Signature:</b>	<b>Print</b> <b>Date</b>