

CB Series Startup Form

Date: _____	
Job Name: _____	
Address: _____	
Model Number: _____	
Serial Number: _____	Tag: _____
Startup Contractor: _____	
Address: _____	Phone: _____

Pre Startup Checklist	
Installing contractor should verify the following items.	
1. Is there any visible shipping damage?	<input type="radio"/> Yes <input type="radio"/> No
2. Is the unit level?	<input type="radio"/> Yes <input type="radio"/> No
3. Are the unit clearances adequate for service and operation?	<input type="radio"/> Yes <input type="radio"/> No
4. Do all access doors open freely and are the handles operational?	<input type="radio"/> Yes <input type="radio"/> No
5. Have all shipping braces been removed?	<input type="radio"/> Yes <input type="radio"/> No
6. Have all electrical connections been tested for tightness?	<input type="radio"/> Yes <input type="radio"/> No
7. Does the electrical service correspond to the unit nameplate?	<input type="radio"/> Yes <input type="radio"/> No
8. On 208/230V units, has transformer tap been checked?	<input type="radio"/> Yes <input type="radio"/> No
9. Has overcurrent protection been installed to match the unit nameplate requirement?	<input type="radio"/> Yes <input type="radio"/> No
10. Have all set screws on the fans been tightened?	<input type="radio"/> Yes <input type="radio"/> No
11. Do all fans and pumps rotate freely?	<input type="radio"/> Yes <input type="radio"/> No
12. Is all copper tubing isolated so that it does not rub?	<input type="radio"/> Yes <input type="radio"/> No

Ambient Temperature	
Ambient Dry Bulb Temperature _____ °F	Ambient Wet Bulb Temperature _____ °F

Compressors / DX Cooling						
Number/stage	L1	L2	L3	Head Pressure PSIG	Suction Pressure PSIG	Crankcase Heater Amps
1 – Full Capacity						
2 – Reduced Capacity						

Refrigeration System 1 Full Capacity – Cooling Mode					
	Pressure	Saturated Temperature	Line Temperature	Sub-cooling	Superheat
Discharge				N/A	N/A
Suction				N/A	
Liquid					N/A
Refrigeration System 1 Reduced Capacity – Cooling Mode					
	Pressure	Saturated Temperature	Line Temperature	Sub-cooling	Superheat
Discharge				N/A	N/A
Suction				N/A	
Liquid					N/A
Refrigeration System 1 Full Capacity – Heating Mode (Heat Pump only)					
	Pressure	Saturated Temperature	Line Temperature	Sub-cooling	Superheat
Discharge				N/A	N/A
Suction				N/A	
Liquid					N/A
Refrigeration System 1 Reduced Capacity – Heating Mode (Heat Pump only)					
	Pressure	Saturated Temperature	Line Temperature	Sub-cooling	Superheat
Discharge				N/A	N/A
Suction				N/A	
Liquid					N/A

Air-Cooled Condenser Fan				
Alignment_____ <input type="checkbox"/>		Check Rotation_____ <input type="checkbox"/>		Nameplate Amps_____
Number	hp	L1	L2	L3
1				

Maintenance Log

This log must be kept with the unit. It is the responsibility of the owner and/or maintenance/service contractor to document any service, repair or adjustments. AAON Service and Warranty Departments are available to advise and provide phone help for proper operation and replacement parts. The responsibility for proper start-up, maintenance and servicing of the equipment falls to the owner and qualified licensed technician.

Entry Date	Action Taken	Name/Tel.