



1.H3/V3 SERIES STARTUP FORM

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

1.1. Pre Startup Checklist

Installing contractor must verify the following items.	
1. Is there any visible shipping damage?	<input type="checkbox"/> YES
2. Is the unit level?	<input type="checkbox"/> YES
3. Are the unit clearances adequate for service and operation?	<input type="checkbox"/> YES
4. Do all access doors open freely and are the handles operational?	<input type="checkbox"/> YES
5. Have all shipping braces been removed?	<input type="checkbox"/> YES
6. Have all electrical connections been tested for tightness?	<input type="checkbox"/> YES
7. Does the electrical service correspond to the unit nameplate?	<input type="checkbox"/> YES
8. On 208/230V units, has transformer tap been checked?	<input type="checkbox"/> YES
9. Has overcurrent protection been installed to match the unit nameplate requirement?	<input type="checkbox"/> YES
10. Have all set screws on the fans been tightened?	<input type="checkbox"/> YES
11. Do all fans rotate freely?	<input type="checkbox"/> YES
12. Does the field water piping to the unit appear to be correct per design parameters?	<input type="checkbox"/> YES
13. Is all copper tubing isolated so that it does not rub?	<input type="checkbox"/> YES
14. Have the damper assemblies been inspected?	<input type="checkbox"/> YES
15. Are air filters installed with proper orientation?	<input type="checkbox"/> YES
16. Have condensate drain and p-trap been connected?	<input type="checkbox"/> YES
17. Is the TXV sensing bulb in the correct location?	<input type="checkbox"/> YES
18. Does the TXV sensing bulb have proper thermal contact and is properly insulated?	<input type="checkbox"/> YES
19. Are all ship-loose components and cabinets (if applicable) installed per unit drawing and wiring diagram.	<input type="checkbox"/> YES
20. Is the actual refrigerant charge of the largest circuit in accordance with the required conditioned floor area according to Table 18, Table 19, Table 20?	<input type="checkbox"/> YES
21. Are ventilation and exhaust openings unobstructed?	<input type="checkbox"/> YES
22. Are markings, decals, and warnings on unit clearly visible?	<input type="checkbox"/> YES
23. Are all damaged or illegible markings and warnings replaced?	<input type="checkbox"/> YES
24. Has the functionality of the Refrigerant Detection System been verified?	<input type="checkbox"/> YES



1.2. Ambient Temperature

Ambient Dry Bulb Temperature _____°C/°F	Ambient Wet Bulb Temperature _____°C/°F
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1.3. Voltage

L1-L2	L2-L3	L1-L3	L1-Ground	L2-Ground	L3-Ground

1.4. Supply Fan Assembly

Alignment <input type="checkbox"/>		Check Rotation <input type="checkbox"/>		Nameplate Amps _____	
Number	hp	L1 Volts/Amps	Number	hp	
1			1		
2			2		
VFD Frequency _____			VAV Controls _____		

1.5. Energy Recovery Wheel Assembly

Wheels Spin Freely <input type="checkbox"/>		Check Rotation <input type="checkbox"/>		FLA _____	
Number	hp	L1 Volts/Amps	L2 Volts/Amps	L3 Volts/Amps	
1					

1.6. Dampers

OA Operation Check <input type="checkbox"/>	Damper Wiring Check <input type="checkbox"/>	Gears Check <input type="checkbox"/>
RA Operation Check <input type="checkbox"/>	Damper Wiring Check <input type="checkbox"/>	Gears Check <input type="checkbox"/>
EA Operation Check <input type="checkbox"/>	Damper Wiring Check <input type="checkbox"/>	Gears Check <input type="checkbox"/>
Damper Actuator Type: _____		
Economizer Changeover Type and Operation: _____		

1.7. Refrigeration System 1 - Cooling Mode

	Pressure	Saturated Temperature	Line Temperature	Sub-cooling	Superheat
Discharge				N/A	N/A
Suction				N/A	
Liquid					N/A

1.8. Refrigeration System 2 - Cooling Mode

	Pressure	Saturated Temperature	Line Temperature	Sub-cooling	Superheat
Discharge				N/A	N/A
Suction				N/A	
Liquid					N/A

1.9. Refrigeration System 3 - Cooling Mode

	Pressure	Saturated Temperature	Line Temperature	Sub-cooling	Superheat
Discharge				N/A	N/A
Suction				N/A	
Liquid					N/A

1.10. Refrigeration System 4 - Cooling Mode

	Pressure	Saturated Temperature	Line Temperature	Sub-cooling	Superheat
Discharge				N/A	N/A
Suction				N/A	
Liquid					N/A

1.11. Compressors/DX Cooling

Check Rotation <input type="checkbox"/>						
Number	L1 Volts/Amps	L2 Volts/Amps	L3 Volts/Amps	Head Pressure KPA/PSIG	Suction Pressure KPA/PSIG	Crankcase Heater Amps
1						
2						
3						
4						

1.12. Air-Cooled Condenser Fans

Alignment <input type="checkbox"/>		Check Rotation <input type="checkbox"/>		Nameplate Amps _____	
Number	hp	L1 Volts/Amps	L2 Volts/Amps	L3 Volts/Amps	
1					
2					
3					
4					

1.13. Refrigeration System 1 - Heating Mode (Heat Pump Only)

	Pressure	Saturated Temperature	Line Temperature	Sub-cooling	Superheat
Discharge				N/A	N/A
Suction				N/A	
Liquid					N/A

1.14. Refrigeration System 2 - Heating Mode (Heat Pump Only)

	Pressure	Saturated Temperature	Line Temperature	Sub-cooling	Superheat
Discharge				N/A	N/A
Suction				N/A	
Liquid					N/A

1.15. Refrigeration System 3 - Heating Mode (Heat Pump Only)

	Pressure	Saturated Temperature	Line Temperature	Sub-cooling	Superheat
Discharge				N/A	N/A
Suction				N/A	
Liquid					N/A

1.16. Refrigeration System 4 - Heating Mode (Heat Pump Only)

	Pressure	Saturated Temperature	Line Temperature	Sub-cooling	Superheat
Discharge				N/A	N/A
Suction				N/A	
Liquid					N/A

1.17. Water/Glycol System

1. Has the entire system been flushed and pressure checked?	<input type="checkbox"/> YES
2. Has the entire system been filled with fluid?	<input type="checkbox"/> YES
3. Has air been bled from the heat exchangers and piping?	<input type="checkbox"/> YES
4. Is the glycol the proper type and concentration (N/A if water)?	<input type="checkbox"/> YES
5. Is there a minimum load of 50% of the design load?	<input type="checkbox"/> YES
6. Has the water piping been insulated?	<input type="checkbox"/> YES
7. What is the freeze point of the glycol (N/A if water)? _____	<input type="checkbox"/> YES

1.18. Electric Heating

Stages _____		Limit Lockout <input type="checkbox"/>	Aux. Limit Lockout <input type="checkbox"/>
Stage	Amps	Stage	Amps
1		5	
2		6	
3		7	
4		8	



1.19. Gas Heating

1. Does the unit include a shipped loose Heatco gas heater? Refer to the provided Heatco IOM for all installation requirements.	<input type="checkbox"/> YES
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1.20. A2L Mitigation Board

1. Does each port (sensor 1-3) have a male connector plugged in on both the Cabinet and Airstream board?	<input type="checkbox"/> YES
2. Do the compressor(s) and gas heat operation shut off when the Cabinet Board is in the alarm state?	<input type="checkbox"/> YES
3. Does the unit operate normally except compressor and gas heat operation when the Cabinet Board is in the alarm state?	<input type="checkbox"/> YES
4. Do the compressor(s) shut off and fan(s) stay on when the Airstream Board is in the alarm state?	<input type="checkbox"/> YES
5. Does non-compressor or gas heating/cooling stay on when both A2L Mitigation boards are in the alarm state?	<input type="checkbox"/> YES



3.AAON E-COATED COIL MAINTENANCE RECORD

Installation Site: _____ Installation Date: _____
 Unit Model #: _____ Unit Location: _____
 Unit Serial #: _____ Customer: _____

Year 20__	Ambient Temp (°F)	Surface Debris Removed	Coil Cleaned	Approved Cleaner Used	Potable Water Backwash Rinse	Potable Water Frontwash Rinse	Chlorides Removed	Comments
JAN		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
FEB		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
MAR		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
APR		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
MAY		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
JUN		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
JUL		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
AUG		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
SEP		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
OCT		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
NOV		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
DEC		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

The following cleaners have been approved for use on AAON E-Coated Coils to remove mold, mildew, dust, soot, greasy residue, lint, and similar particulates without harming the coated surfaces.

Cleaning Agent	Reseller	Part Number
GulfClean™ Coil Cleaner Or Enviro-Coil Cleaner	RectorSeal 2601 Spenwick Drive, Houston, Texas 77055 (P): 713-263-8001	G074480 / 80406 Or V82540
GulfClean Salt Reducer™	" "	G074480 / 80406

Recommended Chloride Remover
RectorSeal 2601 Spenwick Drive, Houston, Texas 77055 (P): 713-263-8001