

35-Point PM Service Checklist

PM TECH # _____ Day Phone # (_____) _____

Brand _____ Model # _____ Serial # _____

Compressor Model # _____ Install Address _____

Refrigerant Type _____ Lubricant Type _____ Starting Amps _____

Equipment Location (Street Name & Number) _____

City _____, State _____, ZipCode _____

Annual Renewable Warranty Type

Check One:

- New Installation, First Service on used Equipment less than 5 years old,
- Annual Service - Equipment less than 5 years old,
- Five Year Service (**Requires QwikChange Filter installation – if checked, confirm that:**
 - QwikChange Filter installed),
- Annual Service - Equipment more than 5 years old (**Requires QwikChange Filter replacement – if checked, confirm that:** QwikChange Filter replaced)

CHECK ALL ITEMS THAT APPLY

1. Superheat OK Added Charge Not Checked

Install QwikGauge & Explain to Equipment Owner How to check QwikGauge.

Refrigerant _____ High Side Pressure _____ PSIG Superheat Reading _____ °F

2. Acid OK Treated with QwikCheck & Filter/Drier Changed

Used QwikCheck given to Equipment Owner

Filter Used _____ in³, Capacity _____ Drops of Water, Bottles QwikShot Used _____

3. Moisture OK Filter/Dryer Changed No Moisture Indicator Present

Installed QwikLook

4. Corrosion Check

No Corrosion Present Rust Proofed _____ Lubricated _____

5. Air Flow Path OK Cleaned Not Checked

6. Outdoor Coil Fins Straightened Cleaned

7. Indoor Coil Fins Straightened Cleaned

8. Condensate Pan Cleaned Drain Checked QwikTreat Added

9. Check Duct Work for Air Leaks

OK Repaired _____ No Inspection Performed

10. Blower Operation OK Blower Repaired _____

11. Condenser Fan OK Blower Repaired _____

12. Compressor leads are securely fastened

OK Repaired _____ Installed QwikLugs

13. Compressor Contactor OK Replaced Installed Contactor Saver

14. Compressor RUN Capacitor Check Out

Replace without testing if the Capacitor is damaged, swollen, or Leaking

Perform Test with the compressor running

AC Voltage across the run capacitor: _____ Volts

Amperage being drawn through the start Circuit: _____ Amps

Measure current in the wire between the capacitor and the compressor's start terminal.

Compressor RUN Capacitance Label Value _____ μ F Measured Value _____ μ F

Capacitor OK Replaced _____

Replace capacitor if measured capacitance is less than 0.9 times Label Value

15. Compressor Start Capacitor or Hard Start Kit

Replace without testing if the Capacitor is damaged, swollen, or Leaking

amperage spike for about 1/4 sec was detected No Start Kit

Start Cap & Mechanical Relay Start Cap & Electronic Relay

After-Market Hard Start Kit: Make _____ Model # _____

16. Compressor Amp Draw

Current Draw after Start Up _____ Amps Nameplate Amp Value _____

Circuit Capacity _____ Amps

17. Check for proper Operation of the compressor.

OK Replaced Compressor Make _____ Model # _____

Installed Hard Start Kit

18. Fan RUN Capacitor

Replace without testing if the Capacitor is damaged, swollen, or Leaking

With Fan running, AC VOLTAGE across the run capacitor: _____ Volts

Amperage being drawn through the start Circuit: _____ Amps

Measure current in the wire between the capacitor and the fan motor's start terminal.

Fan Motor's RUN Capacitance Label Value _____ μ F Measured Value _____ μ F

Capacitor OK Replaced _____

Replace capacitor if measured capacitance is less than 0.9 times Label Value

19. Blower Motor RUN Capacitor

Replace without testing if the Capacitor is Damaged or Leaking

With blower running, AC VOLTAGE **across the run capacitor:** _____ Volts

Amperage being drawn **through the start Circuit:** _____ Amps

Measure current in the wire between the capacitor and the blower motor's start terminal.

Blower's RUN Capacitance Label Value _____ μ F Measured Value _____ μ F

Capacitor OK Replaced _____

Replace capacitor if measured capacitance is less than 0.9 times Label Value

20. Strip Heaters

OK Amp Draw _____ AMPS Replaced Not Present

21. Heat Pump 4-Way Valve

OK Replaced _____ Not Present

22. Crankcase Heater

OK Amp Draw _____ AMPS Replaced Not Tested

23. Charge OK Added _____ (Total nameplate System Charge is _____)

Low Side Pressure _____ PSIG High-Side Pressure _____ PSIG

24. Unit is Properly Grounded: OK Repaired

25. Unit is Level and Properly Mounted: OK Repaired

26. Outdoor Air Flow Path is Not Restricted: OK Repaired

27. Cycle Test: Unit was restarted after _____ minutes idle.

Restarted properly Repaired _____

28. Low-Pressure Safety Control: Checked, Installed, None Present

29. High-Pressure Safety Control: Checked, Installed, None Present

30. Drain Pan Safety Control: Checked, Installed, None Present

31. Check Thermostat Level OK Repaired

32. Check Thermostat Calibration OK Replaced

33. Suggested Performance or Efficiency Improvements

Discussed – See Comments below No Inspection Performed

34. Warranty Material Given to Owner

Location of QwikLook monitor shown to Owner

Location of QwikGauge monitor shown to Owner

QwikCheck Given to Owner

UPC Code for QwikChange Filter Housing given to Owner (when installed)

- UPC Code for QwikChange Filter Element given to Owner (when installed)
- Warranty Information and Service Checks explained to Owner

35. Certifications

PM TECH Certification

I _____, as a certified PM TECH have personally performed a complete service of the above described unit and certify that all the information of the form is correct, signed: _____.

Owner Certification

I _____, as the equipment owner have reviewed this 35-Point Service Check List for completeness. I have read and understand the terms and conditions of the compressor warranty, and that the PM service report must be inspected and accepted, by Mainstream, before the warranty becomes effective. I also understand that it is my responsibility to mail this warranty information to Mainstream, at the address below and that the limited compressor warranty only covers the mechanical failure of the compressor with a maximum monetary limit of one-hundred and fifty dollars (\$150.00).

Signed _____.

Owners Name: _____

Owners Address: _____

City _____, State _____, ZipCode _____

Owners Phone # (_____) _____

Owners E-Mail Address _____

IF ANY INFORMATION SUBMITTED TO MAINSTREAM (WHETHER PROVIDED BY THE EQUIPMENT OWNER OR THE SERVICE COMPANY) IN CONNECTION WITH ANY WARRANTY OFFERED BY MAINSTREAM, INCLUDING ANY INFORMATION ON THIS 35-POINT PM SERVICE CHECKLIST, IS INACCURATE, FALSE OR MISLEADING, OR IF ANY INFORMATION REQUIRED HEREUNDER IS NOT SUBMITTED TO MAINSTREAM, SUCH WARRANTY IS INVALID AND VOID.
