



BLUE MOUNTAIN
PLUMBING • HEATING • COOLING

Service Partner™
Home Heating / Cooling Evaluation

Service Partner: _____ Dispatch Number: _____
 Technician: _____ Date: _____

Furnace _____ (A) PRE-SERVICE CHECK YES NO
 Condenser _____ 1. Customer satisfied with system performance
 Age (approximate) _____ 2. Operation tested before maintenance

(B) AIR FLOW YES NO
 1. Air filter condition OK
 2. Free and balanced rotation of blower wheel
 3. Blower compartment and wheel clean
 4. Blower mounts and set screws are tight
 5. Wire connections are tight and insulation OK
 6. Blower motor amperage satisfactory
 7. Air temperature differential within tolerance
 △ T _____ ° SA _____ ° RA _____ °

(C) INDOOR COIL YES NO
 1. Condensation drain and pump OK
 2. Drain pan / coil surface clean

(D) CONDENSER YES NO
 1. Electrical wiring, connectors and insulation OK
 2. Amperage draw on condenser fan motor within spec
 3. Amperage draw on compressor within spec
 4. Evidence of leaks near lineset and connections
 5. Refrigerant level within spec
 ODT _____ S.H. _____ S.C. _____
 _____ / _____ PSIG
 6. Condenser coil clean.

(E) FURNACE / BOILER YES NO
 1. Heat exchanger inspected
 2. Burners ignition and flame within tolerance
 3. Manifold gas pressure within tolerance
 Nat _____ in wc LP _____ in wc
 4. Drainage tubing and ports open and satisfactory
 5. Flame sensor operating within range
 6. Pressure switch and tube operating within spec
 7. Venter motor amperage draw within spec
 8. Limit switch operating within spec
 9. Wire connections are tight / insulation acceptable
 10. Burners removed and cleaned

(F) HUMIDIFIER YES NO
 1. Wire connections are tight / insulation acceptable
 2. Transformer voltage within tolerance
 3. Damper in correct seasonal position
 4. Water panel in satisfactory condition
 5. Drain line unclogged

(G) GEOTHERMAL YES NO
 1. EWT (Entering Water Temperature) _____ °F
 2. EWP (Entering Water Pressure) _____ PSIG
 3. LWT (Leaving Water Temperature) _____ °F
 4. LWP (Leaving Water Pressure) _____ PSIG
 5. Loop _____ Open _____

I understand that this evaluation is performed with the fullest intent to expose all possible heating / cooling problems but by no means carries any guarantees. Neither this company, nor any person or entity associated with this company nor the service representative performing the evaluation shall be held liable for any damages which may arise from any identified or unidentified heating / cooling problem but shall be the sole liability of the home owner.

Service Partner Signature _____ Date _____

RECOMMENDATIONS:

 See additional recommendations on a separate sheet.

Blue Mountain • P.O. Box 30 • Fishersville, VA 22939 • 540-942-2700