

Hi-Velocity Systems™ Service and Performance Form

Date _____

Job Information

Date Installed _____

Job Name _____
Job Location _____
Installing Contractor _____
Contact Name _____
Address _____
City, State _____
Zip Code _____
Phone Number _____
Fax Number _____

Job Number _____
Distributor/Supplier _____
Contact Name _____
Phone Number _____
Fax Number _____
Elevation _____
Design Temp. (Heating/Cooling) _____

Issue Heating Cooling Airflow

System Information

Fancoil Model _____ Voltage _____ Amperage _____ Watts _____
Fancoil Serial _____
Dip Switch Setting _____
PWM Yes No
Static Plate Installed Yes No
Filter Clean Dirty
Static Press. 18" from Supply _____ E.A.T. (DB/WB) _____
Static Press. Blower Compartment _____ L.A.T. (DB/WB) _____
E.A.T. R/A Grill _____ L.A.T. First Outlet _____
Airflow _____ L.A.T. Last Outlet _____

Ductwork Information

Fancoil Location Attic Crawlspace Conditioned Space
Plenum Location Attic Crawlspace Conditioned Space
Return Air Location Attic Crawlspace Conditioned Space
Plenum Length _____ Insulated Yes No R-Value _____ Distance to First Elbow/Tee _____
Extra Insulation Over Ductwork Yes No R-Value _____
Total # Of 2" Vents (HE Vents = Two 2" Vents) _____ Number Of 10' AFD's _____
Total # Of 15' AFD's _____ Number Of Other AFD's _____ Average Length Of Others _____

Heating Information (Electric Strip, Hot Water)

Model _____ E.W.T _____ % Glycol _____ Coil Size 4 Row 6 Row
Serial _____ L.W.T _____ Circ. Pump _____ Lines (Size/Length) _____

Cooling Information (Chilled Water)

Model _____ E.W.T _____ % Glycol _____ Lines (Size/Length) _____
Serial _____ L.W.T _____ Circ. Pump _____

Refrigerant Information (AC, Heat Pump)

Model _____ Suction Press. _____ Siteglass Bubbles Clear
Serial _____ Liquid Press. _____ Moisture Wet Dry
Outdoor Make _____ Suction Temp. _____ Outdoor E.A.T. _____
Outdoor Model _____ Liquid Temp. _____ Outdoor L.A.T. _____
Location Of TXV Bulb _____ Insulated Yes No Outdoor Amps _____
Location Of Anti-Ice Control _____ Insulated Yes No Filter-Drier _____
Location Of Equalizer Line _____ Insulated Yes No Line-set (Length/Height) _____
Expansion Valve Size _____ Expansion Valve Model _____
P-Trap Yes No Hard Start Kit Yes No Hot Gas BP Yes No Delay Timer Yes No

If More Than One Fancoil Is Present On This Job, Please Indicate Which One: _____

Notes: _____

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Airflow Information

Date _____

Date Installed _____

#	Location	FPM	LPS	CFM
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
21				
22				
23				
24				
25				

#	Location	FPM	LPS	CFM
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
21				
22				
23				
24				
25				

TOTAL CFM _____

Conversion Factors

2" Knots to CFM: x 2.2
 HE Knots to CFM: x 4.2
 2" FPM to CFM: x 0.022
 HE FPM to CFM: x 0.042

2" Knots to L/s: x 1.4
 HE Knots to L/s: x 1.98
 2" m/s to L/s: x 2.02
 HE m/s to L/s: x 3.85

If More Than One Fancoil Is Present On This Job, Please Indicate Which One: _____

Notes:
