

FIELD START-UP TEST SHEETS

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www.dataaire.com



DAFC Fluid Coolers

Instructions:

This test sheet must be completely filled out during start-up and returned to Data Aire, Inc. Failure to return the test sheet may limit or cause delays in warranty coverage. Some of the terms listed require specific information to be entered and others may only need a check mark that verifies a test or inspection has been conducted. Items not applicable should be marked "N/A".

UNIT IDENTIFICATION

Job Number: _____ Model Number: _____

Serial Number: _____

TEST VOLTAGE

Voltage: A-B _____ A-C _____ B-C _____

Fan Speed Control System: Yes or No

FAN MOTOR No. 1 (HEADER END)

Motor HP: _____ F.L.A.: _____ Voltage: _____ Running Amps: _____

Running Amps: _____ Fan Starting Pressure: _____

Voltage: _____ Fan Maximum Speed Pressure: _____

FAN MOTOR No. 2

Motor HP: _____ F.L.A.: _____ Voltage: _____ Running Amps: _____

Running Amps: _____ Fan Starting Pressure: _____

FAN MOTOR No. 3

Motor HP: _____ F.L.A.: _____ Voltage: _____ Running Amps: _____

Running Amps: _____ Thermostat set at: _____ ° F

FAN MOTOR No. 4

Motor HP: _____ F.L.A.: _____ Voltage: _____ Running Amps: _____

Running Amps: _____ Thermostat set at: _____ ° F

FAN MOTOR No. 5

Motor HP: _____ F.L.A.: _____ Voltage: _____ Running Amps: _____

Running Amps: _____ Thermostat set at: _____ ° F

FAN MOTOR No. 6

Motor HP: _____ F.L.A.: _____ Voltage: _____ Running Amps: _____
Running Amps: _____ Thermostat set at: _____ ° F

PUMP

Field Piping Size: _____ Pump H.P.: _____ Amps: Pump No. 1 _____ Pump No. 2: _____
Unit Clearance: Side: _____ inches Side 2: _____ inches Top: _____ inches
Ambient Air Temp: _____ °F Supply Water Temp: _____ °F Return Water Temp: _____ °F
Pump Rotation: ___ CW ___ CCWE Electrical Connections Tight: Yes or No
Flow Switch Operational: Yes or No

OPTIONS

Auto Changeover Controls: Yes or No (Four Second Auto Changeover: Yes or No)
Disconnect Switch: Yes or No Volts: _____
Note: Double wide and triple wide fluid coolers will cycle fans in banks of two and three, respectively.

Comments:

Company Name: _____ **Telephone:** (____) _____

Address: _____

Start-Up Conducted by: _____ **Date:** _____