

## **Air to Water Heat Pump Commissioning Checklist & Service Record**

It is a requirement that the heat pump be installed and commissioned to the manufacturers' instructions. The warranty must be registered with the manufacturer and in accordance with their terms and conditions.

The system shall be serviced in line with the manufacturers' recommendations annually and must be carried out by a competent person. The details should be recorded in the manufacturers Service Record. Where the manufacturer does not provide a Service Record, then the details should be recorded in this Service Record.

Failure to comply with the manufacturers' servicing instructions and requirements could invalidate the warranty. This does not affect the customer's statutory rights.

**This Commissioning Checklist is to be completed in full by the competent person who commissioned the system as a means of demonstrating compliance with the appropriate Building Regulations.**

**Disclaimer:** While the information in this document been compiled in good faith, no warranty is given or should be implied for its use and the Heat Pump Association hereby disclaims any liability that may arise from its use to the fullest extent permitted under applicable law.

| General Information  |  |   |  |
|--|--|---|--|
| Customer Name  |  |   |  |
| Installation Address and postcode  |  |   |  |
| Company Name   |  |   |  |
| Company Address  |  |   |  |
| Company Telephone  |  |   |  |
| Commissioning Engineer Name  |  | Commissioning Date                                |  |
| MCS Company Registration No. (if applicable)   |  |   |  |
| F-Gas certification number (Refrigerant Split HP only)   |  |   |  |
| G3 Certification number (if applicable)  |  |   |  |
| DNO notified and approved  | <input type="checkbox"/> Yes                                 |   | <input type="checkbox"/> No*   |
| Installation complies with Building Regulations  | <input type="checkbox"/> Yes                                 | Building Regs Notification Number (if applicable) |  |
| Incoming mains water quality checked as per manufacturer instructions                          | <input type="checkbox"/> Yes                                 |   | <input type="checkbox"/> No*   |
| System Schematic reference number (optional)   |  |   |  |
| System Design  |  |   |  |
| Property Design Heat Loss  | (kW)   |   |  |
| Outdoor Design Temperature   | (°C)   |   |  |
| Design flow temp at Outdoor Design Temp  | (°C)   |   |  |
| Heating Delta T  | (K)  |   |  |
| Have heat emitters been sized to meet the design heat loss (Y/N)                               | <input type="checkbox"/> Yes                                 | <input type="checkbox"/> No*                      | Do all emitters heat-up evenly with similar dT across flow return <input type="checkbox"/> Yes |
| Heat Pump System Type  |  |   |  |
| System function type – HEATING   | <input type="checkbox"/> Heat Pump only                      | OR  | <input type="checkbox"/> Hybrid (fossil fuel boiler)   |
| System function type – DHW   | <input type="checkbox"/> Heat Pump only                      | OR  | <input type="checkbox"/> Hybrid (fossil fuel boiler)   |
| Heat Pump Outdoor Unit Information   |  |   |  |
| Outdoor Unit Manufacturer  |  | Model No  |  |
| Outdoor Unit Type  | <input type="checkbox"/> Mono <input type="checkbox"/> Split | Serial No   |  |
| Refrigerant Type   |  | Refrigerant weight total                          | kgs  |
| Product MCS Certificate No. (if applicable)  |  |   |  |
| Pipework Insulated [Note A]  | <input type="checkbox"/> Yes                                 |   | <input type="checkbox"/> No*   |
| De-frost/Condensate Provision  | <input type="checkbox"/> Yes                                 |   | <input type="checkbox"/> No*   |
| Minimum clearances around unit provided  | <input type="checkbox"/> Yes                                 |   | <input type="checkbox"/> No*   |
| Anti-Vibration Installed   | <input type="checkbox"/> Yes                                 |   | <input type="checkbox"/> No  |
| Isolation Valves (Flow & Return) Installed   | <input type="checkbox"/> Yes                                 |   | <input type="checkbox"/> No*   |
| Which of the following protective devices are installed on the circuit serving the compressor? | <input type="checkbox"/> MCB                                 | <input type="checkbox"/> RCD                      | <input type="checkbox"/> RCBO  |
| Device rating (Amps)   |  |   |  |
| Device Type (e.g. Type B)  |  |   |  |
| Outdoor Isolator(s) fitted   | <input type="checkbox"/> Yes                                 |   | <input type="checkbox"/> No*   |
| Heat Pump Indoor Unit Information  |  |   |  |
| Indoor Unit 1 Manufacturer   |  | Model No  |  |
| Indoor Unit 1 Type (e.g. Hydrobox)   |  | Serial No   |  |
| Indoor Wiring Centre Manuf. (if applicable)  |  | Model No  |  |
| Indoor Unit 2 Wiring Centre  |  | Serial No   |  |

| DHW Cylinder Information  |  |   |   |
|---|--|---|---|
| Cylinder Manufacturer   |  | Model No  |   |
| Cylinder Type (unvented, vented, thermal store, etc.)   |  | Serial No   |   |
| Storage volume  | (litres)   | Stored DHW Set Temperature  | (°C)  |
| DHW Time & Temp control provided [Note A]   | <input type="checkbox"/> Yes   | G3 Certificate complete (unvented)  | <input type="checkbox"/> Yes                              |
| Legionella Protection method provided   | <input type="checkbox"/> Yes <input type="checkbox"/> No*  |   |   |
| Legionella protection cycle   | Temperature: (°C)  | Frequency: <input type="checkbox"/> daily <input type="checkbox"/> weekly |   |
| Heating Control Information   |  |   |   |
| Maximum Heating Flow Temperature Set  | (°C)   |   |   |
| Heat Pump Circuit Flow Rate   | (l/min)  |   |   |
| Weather Compensation or Internal Temperature Control provided [Note A]  | <input type="checkbox"/> Weather Compensation <input type="checkbox"/> Internal Temperature Control  |   |   |
| Weather Compensation settings   | Min flow temperature: (°C)   | Outdoor ambient temperature: (°C)   |   |
|   | Max flow temperature: (°C)   | Outdoor ambient temperature: (°C)   |   |
| Timer or Programmer provided [Note A]   | <input type="checkbox"/> Yes   |   |   |
| For hybrid systems, a single master control has been fitted and commissioned  | <input type="checkbox"/> Yes   |   |   |
| Heating System Information  |  |   |   |
| Electric Back-up heater (where installed)   | (kW)   | Bi-valent switch-on temperature   | (°C)  |
| System Balanced   | <input type="checkbox"/> Yes <input type="checkbox"/> No*  |   |   |
| Auto Bypass Fitted  | <input type="checkbox"/> Yes <input type="checkbox"/> No*  | Hydraulic Separation  | <input type="checkbox"/> Yes <input type="checkbox"/> No* |
| Heating Expansion Vessel Fitted   | <input type="checkbox"/> Yes <input type="checkbox"/> No*  | Charge  | (bar)   |
| Buffer vessel 4-pipe fitted (where needed)  | <input type="checkbox"/> Yes <input type="checkbox"/> No*  | If Yes, state volume  | (litres)  |
| Volumiser 2-pipe (where needed)   | <input type="checkbox"/> Yes <input type="checkbox"/> No*  | If Yes, state volume  | (litres)  |
| System Flushed & Cleansed (as BS 7593)  | <input type="checkbox"/> Yes <input type="checkbox"/> No*  |   |   |
| System purged of air (as BS 7593)   | <input type="checkbox"/> Yes   |   |   |
| System Water Quality Regime   | <input type="checkbox"/> Inhibitor (as BS 7593)  |   |   |
|   | State Inhibitor Brand:   |   |   |
| AWHP Outdoor Heat Pump Frost Protection Type (Monobloc only) (where required)   | <input type="checkbox"/> Other   |   |   |
|   | State Corrosion Protection Method (e.g. VDI 2035):   |   |   |
| Microbiological growth protection for systems <60°C   | <input type="checkbox"/> No*   |   |   |
|   | <input type="checkbox"/> Antifreeze Valves   |   |   |
|   | <input type="checkbox"/> Glycol antifreeze   | Volume (%):   | Brand:  |
| In-line filter fitted (as per BS 7593)  | <input type="checkbox"/> No*   |   |   |
|   | <input type="checkbox"/> Biocide (as BS 7593) – State Brand:   |   |   |
| Strainer fitted (as per manf. instructions)   | <input type="checkbox"/> Other (as BS 7593) – State method:  |   |   |
|   | <input type="checkbox"/> Magnetic Type OR <input type="checkbox"/> Other Type  |   | Brand:  |
| Minimum System Water Volume for heat pump operation when system controls are closed   | <input type="checkbox"/> Mesh Type OR <input type="checkbox"/> Other type  |   | Brand:  |
|   | Min required by HP manf.   | (litres)  | Minimum is met: <input type="checkbox"/> Yes              |
| Hybrid Systems fossil fuel type (where applicable)  | Gas <input type="checkbox"/> Oil <input type="checkbox"/> LPG <input type="checkbox"/> Electric boiler <input type="checkbox"/> Other <input type="checkbox"/> |   |   |
| Refrigerant Information (splits only)   |  |   |   |
| Additional refrigerant charge (if applicable)   | (kg)   | Refrigerant pipe total length   | (m)   |
| Pressure test   | (bar)  | Vacuum test   | (mbar)  |
| Declaration   |  |   |   |
| Installer Signature   |  | Print Name  |   |
| <i>I confirm the installation complies with all relevant, current building, electrical, water and F-gas Regulations, Permitted Development (MCS 020) noise calculations and manufacturer's instructions, and the end user has been given all relevant paperwork and knowledge to operate it</i> |  |   |   |
| Customer Signature  |  | Print Name  |   |
| <i>I confirm the equipment has been demonstrated, I understand how to operate it, and I have received all relevant paperwork.</i>   |  |   |   |

**Additional Notes**

**Note [A]. See guidance provided in the Approved Document Part L.** *“Building work must meet all relevant requirements of the Building Regulations. Complying with the guidance in the approved documents (AD) does not guarantee that building work complies with the requirements of the regulations – the approved documents cannot cover all circumstances. Those responsible for building work must consider whether following the guidance in the approved documents is likely to meet the requirements in the particular circumstances of their case. There may be other ways to comply with the requirements than those described in an approved document. If those responsible for meeting the requirements prefer to meet a requirement in some other way than described in an approved document, they should seek to agree this with the relevant building control body at an early stage.”*

**Note:** *If answered No to any of the \* highlighted questions, please add reason(s):-*

## SERVICE RECORD

It is recommended that your heating system is regularly serviced and maintained, in line with manufacturers' instructions, and that the appropriate service record is completed.

| Service 1:       |  |      |  |
|------------------|--|------|--|
| Engineer Name    |  |      |  |
| Engineer Company |  |      |  |
| Contact no.      |  |      |  |
| Comments:        |  |      |  |
|                  |  |      |  |
| Signed           |  | Date |  |
| Service 3:       |  |      |  |
| Engineer Name    |  |      |  |
| Engineer Company |  |      |  |
| Contact no.      |  |      |  |
| Comments:        |  |      |  |
|                  |  |      |  |
| Signed           |  | Date |  |
| Service 5:       |  |      |  |
| Engineer Name    |  |      |  |
| Engineer Company |  |      |  |
| Contact no.      |  |      |  |
| Comments:        |  |      |  |
|                  |  |      |  |
| Signed           |  | Date |  |
| Service 7:       |  |      |  |
| Engineer Name    |  |      |  |
| Engineer Company |  |      |  |
| Contact no.      |  |      |  |
| Comments:        |  |      |  |
|                  |  |      |  |
| Signed           |  | Date |  |
| Service 9:       |  |      |  |
| Engineer Name    |  |      |  |
| Engineer Company |  |      |  |
| Contact no.      |  |      |  |
| Comments:        |  |      |  |
|                  |  |      |  |
| Signed           |  | Date |  |

| Service 2:       |  |      |  |
|------------------|--|------|--|
| Engineer Name    |  |      |  |
| Engineer Company |  |      |  |
| Contact no.      |  |      |  |
| Comments:        |  |      |  |
|                  |  |      |  |
| Signed           |  | Date |  |
| Service 4:       |  |      |  |
| Engineer Name    |  |      |  |
| Engineer Company |  |      |  |
| Contact no.      |  |      |  |
| Comments:        |  |      |  |
|                  |  |      |  |
| Signed           |  | Date |  |
| Service 6:       |  |      |  |
| Engineer Name    |  |      |  |
| Engineer Company |  |      |  |
| Contact no.      |  |      |  |
| Comments:        |  |      |  |
|                  |  |      |  |
| Signed           |  | Date |  |
| Service 8:       |  |      |  |
| Engineer Name    |  |      |  |
| Engineer Company |  |      |  |
| Contact no.      |  |      |  |
| Comments:        |  |      |  |
|                  |  |      |  |
| Signed           |  | Date |  |
| Service 10:      |  |      |  |
| Engineer Name    |  |      |  |
| Engineer Company |  |      |  |
| Contact no.      |  |      |  |
| Comments:        |  |      |  |
|                  |  |      |  |
| Signed           |  | Date |  |