

# HVAC Preventive Maintenance Checklist

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General checklist for a residential split system. Follow the equipment manufacturer's maintenance instructions, which take priority over this list.

|                |           |            |             |
|----------------|-----------|------------|-------------|
| Customer       | Date      | Technician | System type |
| Equipment make | Model no. | Serial no. |             |

## Cooling and airflow

|                                                | OK                       | Attention                | N/A                      |
|------------------------------------------------|--------------------------|--------------------------|--------------------------|
| Thermostat operation and settings              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Air filter checked; replaced if needed         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Indoor coil condition                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Blower wheel and motor                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Condensate drain and pan clear                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Outdoor coil condition; cleaned if needed      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Refrigerant line insulation                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Electrical connections inspected and tightened | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Capacitors measured against rating             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Contactor condition                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Motor amp draw compared with nameplate         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

## Heating

|                                  | OK                       | Attention                | N/A                      |
|----------------------------------|--------------------------|--------------------------|--------------------------|
| Burners and ignition             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Flame sensor                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Flue and venting                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Gas connections leak checked     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Heat exchanger visual inspection | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Carbon monoxide check            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Safety controls and limits       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

## Readings

| Reading          | Value | Reading | Value |
|------------------|-------|---------|-------|
| Supply air temp. |       |         |       |
| Suction pressure |       |         |       |
| Superheat        |       |         |       |
| Supply voltage   |       |         |       |

Recommendations

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|                               |                             |               |
|-------------------------------|-----------------------------|---------------|
| _____<br>Technician signature | _____<br>Customer signature | _____<br>Date |
|-------------------------------|-----------------------------|---------------|