



Quality HVAC Program | Quality Maintenance Setup Tier I Checklist

Company Name & CSLB Number:

Household Last Name & Street Number:

Customer email:

Service Date:

DIRECTIONS: This comprehensive checklist is to be completed onsite and uploaded to Iris. Certain key findings -- indicated by thick boxes below -- must be reviewed with and signed off by the customer. This customer review can be done using this checklist or via the Quality Service Report you will get by email. The key findings must also be entered in the online form at https://frontierenergy.formstack.com/forms/qms_i

INSPECTIONS

Attic Insulation	Results	4	<input type="radio"/> No Further Attention Needed on Attic Insulation	<div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;">All sections must be completed. If they are Not Applicable, write "NA" and add an explanation in the comments box.</div> <div style="border: 1px solid black; padding: 5px;">Remember, boxed values must be entered online</div>
		5	<input type="checkbox"/> NA – no attic / not accessible	
		6	<input type="checkbox"/> Adequate and in good condition	
		7	<input type="checkbox"/> Needs minor adjustments	
		8	<input checked="" type="radio"/> Further Attention May Be Needed on Attic Insulation	
		9	<input type="checkbox"/> Needs more insulation	
10	<input type="checkbox"/> Needs replacement			
Duct Insulation	Results	12	<input type="radio"/> No Further Attention Needed on Duct Insulation	
		13	<input type="checkbox"/> NA – ductless system	
		14	<input type="checkbox"/> NA – ducts not accessible	
		15	<input type="checkbox"/> Ducts in conditioned space	
		16	<input type="checkbox"/> Adequate and in good condition	
		17	<input type="checkbox"/> Vapor barrier has only minor tears or gaps	
18	<input checked="" type="radio"/> Further Attention May Be Needed on Duct Insulation			
19	<input type="checkbox"/> Inadequate or in very poor condition			
20	<input type="checkbox"/> Vapor barrier has significant tears/gaps or no barrier			
Air Filter	Results	22	<input type="radio"/> No Further Attention Needed on Air Filter	<div style="border: 1px solid black; padding: 5px; margin-top: 20px;">Enter anything the customer should know and explain anything that is Not Applicable (NA)</div>
		23	<input type="checkbox"/> NA – no filter needed	
		24	<input type="checkbox"/> Filters are adequate	
		25	<input type="checkbox"/> Minor fouling	
		26	<input checked="" type="radio"/> Further Attention May Be Needed on Air Filter	
		27	<input type="checkbox"/> Extremely fouled	
28	<input type="checkbox"/> No filter			
29	<input type="checkbox"/> Undersized for system			
INSPECTION Comments, Recommendations, and/or NA Explanation	72			

TESTS

System Airflow	Results	76	Total Airflow		cfm
		77	System Capacity		tons
		78	<input checked="" type="radio"/> Normalized Airflow		cfm/ton
Temperature Split	System Mode During Test	86	<input checked="" type="radio"/> Heating Mode		
		87	<input type="radio"/> Cooling Mode		
	Results	89	Supply Air Temperature		°F
		90	Return Air Temperature		°F
91	<input checked="" type="radio"/> Temperature Split		°F	For heating = supply - return, ideally 25-65 For cooling = return - supply, ideally 15-25	

Charge Test	Rationale for Test	109	<input type="checkbox"/> Confirmed that Charge Test was Warranted	
		110	<input type="checkbox"/> Bad temperature split	
		111	<input type="checkbox"/> Comfort complaints across rooms	
		112	<input type="checkbox"/> Observed presence of oil suggesting leaks	
		113	<input type="checkbox"/> Other (please explain in comments box)	
		115	<input type="checkbox"/> Did Troubleshooting Before Charge Test	
		116	<input type="checkbox"/> Restricted filter flow	
		117	<input type="checkbox"/> Collapsed/disconnected ductwork	
		118	<input type="checkbox"/> High TESP	
		119	<input type="checkbox"/> High DP across coil	
	120	<input type="checkbox"/> Ducts are too small		
	Test Procedure	122	Was Lowest Outdoor Air Temperature <55°F?	<input type="radio"/> Yes <input type="radio"/> No
		125	If YES, how was test done?	
		126	<input type="checkbox"/> In cooling mode with condenser outlet restrictor	
		127	<input type="checkbox"/> Evacuated and used weigh in method	
128		<input type="checkbox"/> Made plans to return when temperatures are higher		
	129	<input type="checkbox"/> Other (please explain)		
Results	130	Metering Device and Test Completed: <input type="radio"/> TXV/EXV: did SC test <input type="radio"/> Fixed Orifice: did SH test		
	132	Target SC or SH	°F	
	133	Measured SC or SH	°F	
	134	Difference from Target	°F	
Diagnosis	136	<input type="checkbox"/> Charge OK		
	137	<input type="checkbox"/> Charge Too High		
	138	<input type="checkbox"/> Charge Too Low		
	139	<input type="checkbox"/> Another Problem		
Resulting Action Taken	141	<input type="checkbox"/> Discussed with Customer		
	142	<input type="checkbox"/> Recovered Charge		
	143	<input type="checkbox"/> Added Charge		
	144	<input type="checkbox"/> Provided Bid		
	145	<input type="checkbox"/> No Adjustment Made		
TEST Comments, Recommendations, and/or NA Explanation	147			

= refrigerant line temp - saturation temp
= target - measured SC or SH; ideally 0

If added or recovered charge, must also address in the Refrigerant Management section (field #301), including taking a photo.

ADJUSTMENTS

Thermostat and Programming	Talked to Occupant About...	241	<input type="checkbox"/> Thoughts on Current Thermostat and Settings	
		242	<input type="checkbox"/> Current Strategies for Controlling Temperatures	
		243	<input type="checkbox"/> Interest in Advanced Strategies	
		244	<input type="checkbox"/> Recommended Thermostat Schedule	
		245	<input type="checkbox"/> Other Recommendations, ex. Thermostat Upgrade	
	Adjusted and Confirmed	247	<input type="checkbox"/> Checked Sensor Calibration and Adjusted as Needed	
		248	<input type="checkbox"/> Reviewed Programming	
	Scheduled Program	250	<input type="checkbox"/> NA – Not Needed, Already Efficiently Programmed	
		251	<input type="checkbox"/> Offered but Customer Declined	
		252	<input type="checkbox"/> Thermostat Schedule Programmed	
Programming & Overrides	254	<input type="checkbox"/> Offered Instruction but Customer Declined		
	255	<input type="checkbox"/> Programming and Override Instruction Provided		
Setup App or WiFi	259	<input type="checkbox"/> Offered Assistance but Customer Declined		
	260	<input type="checkbox"/> Assisted Customer in Installing or Connecting App		
Uploads	262	<input type="checkbox"/> PDF or Photo of Recommended or Final Programming		
Heat Pump Settings	265	Supplementary Heating OAT Lockout Setpoint	°F	
	266	Defrost Delay Timer Setting	Minutes	

Including Demand Response, Setbacks, Precooling, Thermostat Eco Modes.

Ideally ≤ 35
Ideally ≥ 90

Evacuation and Charging	Refrigerant Management	298	Refrigerant Type		
		299	Cannister Weight Before Adjustment		lb:oz
		300	Cannister Weight After Adjustment		lb:oz
		301	Amount of Refrigerant Added or Recovered		±lb:oz
		302	<input type="checkbox"/> Upload Photo of Scale After Charging, or Final SC/SH		
		303	Name of Technician		
		304	Date		
		305	Serial Number of Equipment that was Adjusted		
Condenser Coils	Cleaning Criteria	310	<input type="checkbox"/> Condenser Coil Cleaning Met all Following Criteria:		= Reading before - reading after; Ideally = target
		311	<input type="checkbox"/> High pressure cleaning system was not used		
		312	<input type="checkbox"/> Caustic or fuming coil cleaning chemicals not used		
		313	<input type="checkbox"/> Flushed with water		
ADJUSTMENT Comments, Recommendations, and/or NA Explanation	314				
SERVICE COMPLETION					
Contract	Maintenance Contract	323	<input type="checkbox"/> Enrolled Customer in Maintenance Contract		
		324	<input type="checkbox"/> Customer Declined Offer of Maintenance Contract		
Other Programs	Referral to Other Programs	344a	Review the following programs with the customer: <input type="checkbox"/> TECH Clean California: \$1,000 incentives for new single family heat pump HVAC systems (up to two systems per home). Requirements: 1) must be a TECH-enrolled contractor, 2) project must be a non-heat pump to heat pump installation, 3) no new construction, retrofits only, 4) equipment must be AHRI matched systems, and 5) equipment must meet Title 24 code minimum standards. See https://techcleanca.com/ .		
		344b	<input type="checkbox"/> GoGreen Financing: GoGreen Home provides California residents with financing for energy efficiency upgrades with zero fees or closing costs and some of the best rates available. Eligibility requires that the property receive electric or natural gas service from PG&E, SDG&E, SCE, or SoCalGas. See https://gogreenfinancing.com/ .		
		344c	<input type="checkbox"/> Self-Generation Incentive Program: SGIP provides incentives for the installation of qualifying on-site power generation and storage technologies. The current residential incentive is \$0.15 per Wh-AC of the system. Advanced approval and funding reservation is required. The program is implemented by your IOU (PG&E, SDG&E, SCE, or SoCalGas). See https://www.selfgenca.com/ , or research your IOU's website.		
COMPLETION Comments, Recommendations, and/or NA Explanation	346				

SIGNATURES

- Electronic signatures will be uploaded later, after review of the emailed Quality Service Report, at:
https://frontierenergy.formstack.com/forms/qhvac_claim_signature_attachment
- Signatures have been obtained below after review of boxed values in this checklist

Customer Name

Technician Name

Customer Signature

I hereby certify that I reviewed the above key findings with the technician. I understand that this does not signify that I am selecting this contractor or accepting this bid.

Technician Signature

I hereby certify that I reviewed the above key findings with the home decision maker.

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