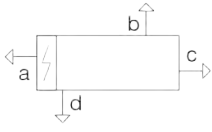


COMPANY NAME OF TECHNICAL SERVICE CENTRE _____	CUSTOMER / INSTALLER _____	INTERNAL PROJECT NUMBER _____
---	-------------------------------	----------------------------------

END USER INFORMATION		UNIT INFORMATION	
COMPANY / MR _____		Type of unit _____ s.n. _____	
STREET _____		O.A. _____	
TOWN _____		Unit reference on site _____	
PRESENT MR _____ TEL. _____		Refr. type / qty _____ oil type _____	
FREE SPACE [cm] (Check scale drawing)			
a: _____	c: _____		
b: _____	d: _____		
YES		NO	
Boxed unit			



INSTALLATION CHECKS (Ref. drawing 01) - See Use and installation manual C0210X01-XX-XX

YES	NO	* Mandatory fields (the warranty is null and void if these are not filled in)	YES	NO	
☐	☐	1. Pressure gauge	☐	☐	10. Primary circuit circulation pump
☐	☐	2. Shut-off valve	☐	☐	11. Pressure relief valve
☐	☐	3. Automatic vent	☐	☐	12. Expansion vessel
☐	☐	4. Anti-vibration joint	☐	☐	B. Tank - capacity: _____
☐	☐	5. Flow switch (required) *	☐	☐	Secondary circuit circulation pump
☐	☐	6. Calibration valve	☐	☐	Pump enables (mandatory) *
☐	☐	7. Shut-off valve	☐	☐	Hydraulic circuit completed
☐	☐	8. Filter (required) *	☐	☐	Hydraulic circuit without air
☐	☐	9. Drain cock			

UNIT CHECKS

YES	NO		YES	NO	
☐	☐	Electrical connections tight	☐	☐	Fans turn freely
☐	☐	Flow switch works	☐	☐	Water pipe brackets correctly fitted
☐	☐	Anti-vibration joints on air duct (ROOFTOP only)	☐	☐	Maximum pressure switch
☐	☐	Exchanger anti-freeze heater	☐	☐	Refrigerant circuit seal
☐	☐	CMP crankcase heater	☐	☐	Unit ground connection
☐	☐	Check phase sequence	☐	☐	Hydraulic connections tight
☐	☐	Water differential pressure switch	☐	☐	Air ducts completed (ROOFTOP only)
☐	☐	Condensate drain with siphon (ROOFTOP only)	☐	☐	Low pressure switch
☐	☐	Tighten and align belt	☐	☐	Calibration of sensors and transducers
☐	☐	CMP oil level			

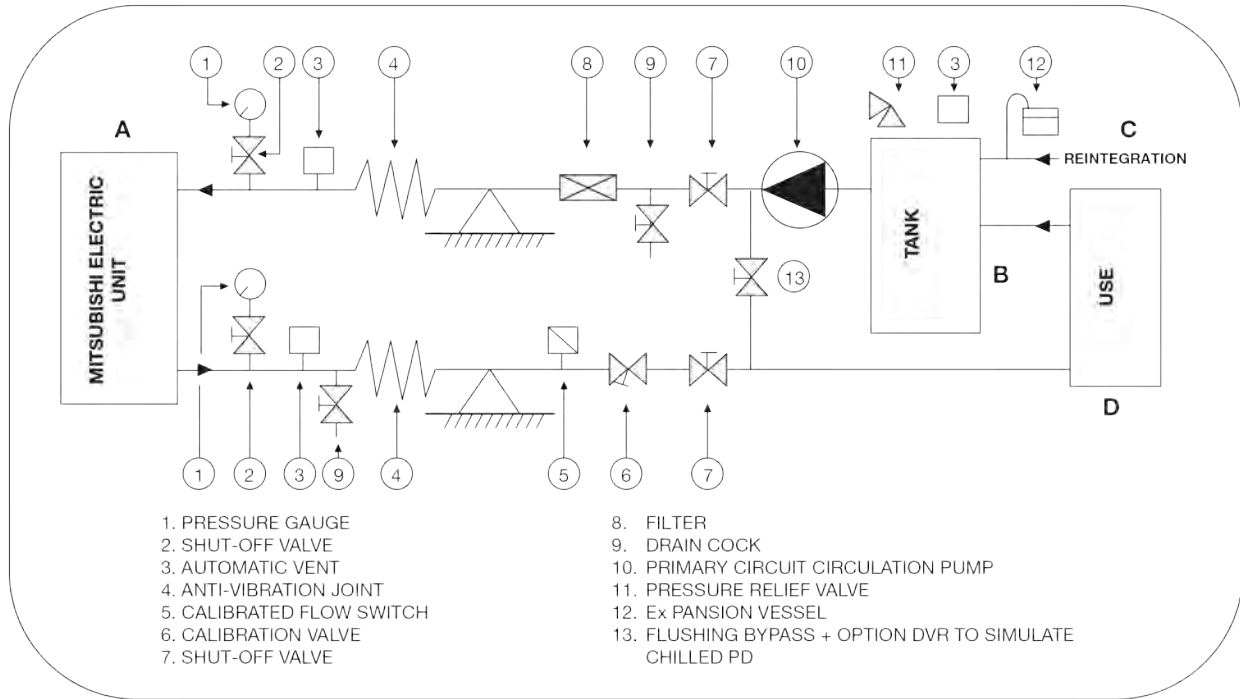
ORDER SPECIFICATIONS

IN/OUT TEMPERATURE [°C]	RATED WATER FLOW [m³/h]	POWER [KW]	BMS present YES ☐ NO ☐
Cold:	Cold:	Cold:	Protocol type:
Hot:	Hot:	Hot:	☐ Modbus
			☐ Lonworks
			☐ Trend
			☐ Bacnet
Glycol type and percentage:			
Mitsubishi Electric supervision: ☐ Manager ☐ Sequencer ☐ FWS Set point _____			

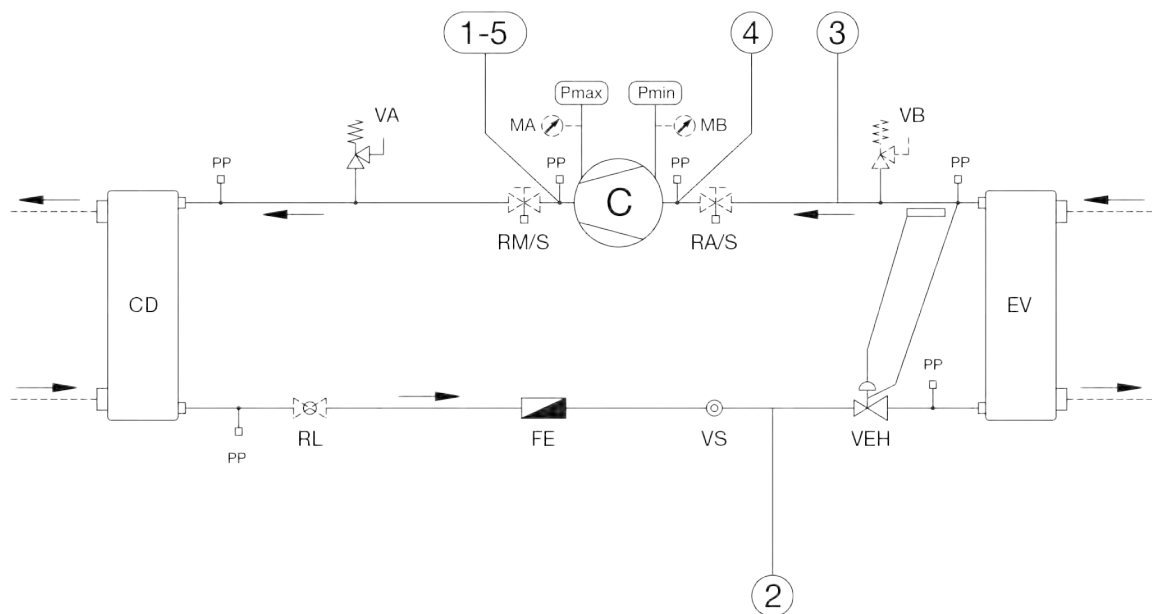
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DISTRIBUTOR CONTACT INFORMATION

Drawing 01



Drawing 02



DISTRIBUTOR CONTACT INFORMATION

ON SITE UNIT WORKING CONDITIONS

The information must be measured with the unit at full capacity, if this is not possible, operate one circuit per time at full capacity:

- ☐ Unit at full capacity
- ☐ Unit at 50%

ONLY FOR ROOFTOP AND AHU UNITS

Heat module	H ₂ O/Air	Evap.	Cond.	Rec.
Commissioning ☐	T in [°C]			
	Supply T. [°C]			
To be performed ☐	press. Drops [Kpa]			

Sw ver.	Ext. Air [°C]	Aux. Voltage [V]	Input Volt. Unit on [V]	Input Volt. Unit off [V]
			/ /	/ /

Air	Chiller	HP	Air flow	
Ret. T. [°C]			Q ret. [m³/h]	
Supply T. [°C]			Q supply [m³/h]	
H ₂ O	Cond. WET Cold	Cond. WET Heat	Cold Coil	Hot Coil
T in [°C]				
T out [°C]				

Cold set-point:	Glycol type and percentage measured:
Hot set-point:	Adjustment type: Proportional ☐ Quick mind ☐ Modulating ☐ PID ☐
Recovery set point:	Other ☐ _____
Evaporator antifreeze set point:	Proportional band:
Condenser antifreeze set point:	Setpoint variation type: 4-20Ma ☐ Dual setpoint ☐ From BMS ☐

CMP	Circuit	DRAWING ID (Ref. drawing 02)							Economiser (where present)
		CMP discharge temperature [°C] ①	Liquid temperature [°C] ②	Suction temperature [°C] ③	Low pressure [Bar] ④	High pressure [Bar] ⑤	Superheating [°C]	Subcooling [°C]	Superheating [°C]
C1									
C2									
C3									
C4									
C5									
C6									
C7									
C8									

For units with centrifugal CMP use the dedicated software to print the “Compressor Controller Parameters, Motor Monitor, Magnetic Bearings” screens and attach the files to this report.

Delivery fan amps [A]	Return fan amps [A]	1	H ₂ O pump amps	2	H ₂ O pump amps
		A		A	

Compressor amps (L1/L2/L3) [A]							
C1	C2	C3	C4	C5	C6	C7	C8

Fan amps (L1/L2/L3) [A]											
Circuit 1						Circuit 2					
Circuit 3						Circuit 4					

CONCLUSIONS * fill in the notes field

☐ Commissioning conditions OK and start-up completed	☐ * Commissioning conditions not OK, start-up completed with reservations
☐ * Commissioning conditions OK but start-up not completed	☐ * Commissioning conditions non-compliant, new appointment required for start-up

Note _____

Name of Mitsubishi Electric technician/s (Write in capital letters)			Name of customer (Write in capital letters)			
The customer was present at the signature for acceptance	YES ☐	NO ☐	Customer signature (For acceptance)			Date

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