

HVAC System Commissioning Field Report

Project Information

Project Name

Location

Date

Commissioning Agent

Contractor

Equipment Model/ID

System Description

Pre-Start Checks

Item	Status	Comments
Power Supply Verified	<input type="text"/>	<input type="text"/>
Wiring/Connections	<input type="text"/>	<input type="text"/>
Ductwork Inspection	<input type="text"/>	<input type="text"/>
Thermostat/Controls	<input type="text"/>	<input type="text"/>

Functional Testing

Test Performed	Result	Remarks
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Startup	<input type="text"/>	<input type="text"/>
Heating Mode	<input type="text"/>	<input type="text"/>
Cooling Mode	<input type="text"/>	<input type="text"/>
Fan Operation	<input type="text"/>	<input type="text"/>

Measured Data

Parameter	Measured Value	Unit
Supply Air Temp	<input type="text"/>	<input type="text"/>
Return Air Temp	<input type="text"/>	<input type="text"/>
Static Pressure	<input type="text"/>	<input type="text"/>
Airflow Rate	<input type="text"/>	<input type="text"/>
Voltage	<input type="text"/>	<input type="text"/>

Deficiencies / Issues

Corrective Actions Taken

Additional Comments

Report Completed By

Reviewer's Name

Signature

Date