

- Startup
- Preventative Maintenance
- Service Work Order



Attention: To avoid site issues, never turn off chiller without prior permission from site personnel.

Site Information

Site name:	Date:	(MM/DD/YYYY)
Site address:		
Technician:	SO/PO#:	
Chiller location:	Roof top <input type="checkbox"/>	Same level as process <input type="checkbox"/>
	Below process <input type="checkbox"/>	Other <input type="checkbox"/> _____
Model:	Serial/produce:	
Was chiller operational upon arrival (Y / N) _____ If not, when was chiller returned to operation (Date / Time) _____		

Refrigerant type:	R407C <input type="checkbox"/>	R134A <input type="checkbox"/>	R410A <input type="checkbox"/>	Other <input type="checkbox"/> _____
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Checklist	Yes	N/A	Yes	N/A
Buffer Tank Water Pressure (ECO only) _____bar	<input type="checkbox"/>	<input type="checkbox"/>	Strainer in chiller and IFP cleaned	<input type="checkbox"/> <input type="checkbox"/>
Fill valve adjusted to open at 0.6 bar static (ECO Only)	<input type="checkbox"/>	<input type="checkbox"/>	Condenser coil clean and fins straight	<input type="checkbox"/> <input type="checkbox"/>
Water circuit checked for leaks	<input type="checkbox"/>	<input type="checkbox"/>	Correct fan rotation	<input type="checkbox"/> <input type="checkbox"/>
Pump seals leak free	<input type="checkbox"/>	<input type="checkbox"/>	Electrical connections tight	<input type="checkbox"/> <input type="checkbox"/>
Water circuit properly purged of air	<input type="checkbox"/>	<input type="checkbox"/>	Relays replaced	<input type="checkbox"/> <input type="checkbox"/>
Obstructions above chiller	<input type="checkbox"/>	<input type="checkbox"/>	Communication interface checked	<input type="checkbox"/> <input type="checkbox"/>
Min. 40 inch clearance around chiller	<input type="checkbox"/>	<input type="checkbox"/>	Chiller operation checked using Eco Data logger	<input type="checkbox"/> <input type="checkbox"/>
Refrigeration system checked for leaks	<input type="checkbox"/>	<input type="checkbox"/>	Software version up to date _____	<input type="checkbox"/> <input type="checkbox"/>

Electrical

Incoming supply voltage: L1 _____ L2 _____ L3 _____	Crankcase heaters operational	<input type="checkbox"/> <input type="checkbox"/>
Supply amperage: L1 _____ L2 _____ L3 _____	Remote display operational	<input type="checkbox"/> <input type="checkbox"/>

Amperage

Pump 1	L1 _____ L2 _____ L3 _____	Pump 2	L1 _____ L2 _____ L3 _____
Compressor 1	L1 _____ L2 _____ L3 _____	Compressor 2	L1 _____ L2 _____ L3 _____
Cond. fan 1	L1 _____ L2 _____ L3 _____	Cond. fan 2	L1 _____ L2 _____ L3 _____
Cond. fan 3	L1 _____ L2 _____ L3 _____	Cond. fan 4	L1 _____ L2 _____ L3 _____

Mechanical

Compressor 1 model # _____	Serial # _____
Compressor 1 oil level	Empty <input type="checkbox"/> 1/4 <input type="checkbox"/> 1/2 <input type="checkbox"/> 3/4 <input type="checkbox"/>
Compressor 2 model # _____	Serial # _____
Compressor 2 oil level	Empty <input type="checkbox"/> 1/4 <input type="checkbox"/> 1/2 <input type="checkbox"/> 3/4 <input type="checkbox"/>

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Mechanical (Continued)

Pump 1 Make / Model # _____		Serial # _____	
Type of glycol _____	Propylene <input type="checkbox"/>	Ethylene <input type="checkbox"/>	Percentage _____ <small>Note: If under 20%, take fluid sample</small>
Water Quality Checked? Yes <input type="checkbox"/> No <input type="checkbox"/>	Distilled <input type="checkbox"/>	Deionized <input type="checkbox"/>	Tap Water <input type="checkbox"/>
Pump 2 Make / Model # _____		Serial # _____	
Type of glycol _____	Propylene <input type="checkbox"/>	Ethylene <input type="checkbox"/>	Percentage _____ <small>Note: If under 20%, take fluid sample</small>
Water Quality Checked? Yes <input type="checkbox"/> No <input type="checkbox"/>	Distilled <input type="checkbox"/>	Deionized <input type="checkbox"/>	Tap Water <input type="checkbox"/>

Pressure

Pump 1	Suction _____	Discharge _____	Static Fluid Pressure (Note: Must be measured with chiller off):
Pump 2	Suction _____	Discharge _____	* ECO Chiller (Measure at IFP) _____
Compressor 1	Suction _____	Discharge _____	* Other Models (Measure at Chiller Pump) _____
Compressor 2	Suction _____	Discharge _____	Nitrogen Pressure (Start-up, PM or Top-Off): Expansion tank _____ Buffer tank (ECO only) _____

No.	Description	Circuit 1	Circuit 2
1	Condensing outlet temperature	°C	°C
2	Liquid temperature	°C	°C
3	Subcooling	°C	°C
4	Evaporation outlet temperature	°C	°C
5	Suction gas temperature	°C	°C
6	Superheat	°C	°C

Ambient temperature: ____ °C
Coolant temperature: ____ °C

Note: Above readings must be taken while chiller is operating against a heat load

Comments

Attention: Please check with site personnel when work is complete, and reset any equipment that may have faulted during service.

Check In Date / Time: _____ Check Out Date / Time: _____ Follow-up required? Yes No

Customer Signature: _____ Date: _____

Please return the completed form to KKT chillers: techsupport@kkt-chillersusa.com