Facility:

Commissioning Provider: Date:

DIRECTIONS: Address each item listed or note why it was not tested/investigated. Add other items that were tested/investigated. Note what testing/investigation was done, how these were conducted and results of the testing/investigation. Indicate any operating parameters found. Put in EEI# for improvements to resolve items that are not optimal or explain why no improvements are recommended. Complete full EEI description and information in PSE NC Post Occ EEI Details form. Include other capital improvements that may be cost effective. Expand to fit information or note specific location of information. (Handwritten legible notes are acceptable.)

**SYSTEM TYPE: *XXXX* (ID #:\_\_\_\_\_\_\_\_\_)**

**EQUIPMENT & SEQUENCES INVESTIGATED** *(be specific)***:**

**Equip ID#s:** *Example: Cooler 1 and 2*

**Area Serves/occupancy type:** *Example: main kitchen*

**Describe System:** *Example: Refrigerated cooler for medium temperature food*

**Sequences:** *Example: Temperature control, On/Off lighting schedule, defrost*

**FINDINGS, TESTS and INVESTIGATION RESULTS:**

**Working Optimally?**

**Yes No N/A EEI# \_\_\_\_\_\_\_ Date(s)/time(s)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**GENERAL SYSTEM CONDITION**: Equipment is generally in good shape and does not exhibit any abnormal nose or vibration. System is not in need of over-all replacement in the near future. Safety guards are in place. Working on and around equipment can be done safely.

Tests Conducted /Results/Findings:

**Yes No N/A EEI# \_\_\_\_\_\_\_ Date(s)/time(s)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SENSOR CALIBRATION & PT-to-PT**: Key controlling sensors are calibrated and in appropriate locations. Points are mapped correctly to the DDC front-end. Other sensor outputs seem reasonable.

Sensors Checked:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tests Conducted /Results/Findings:

**Yes No N/A EEI# \_\_\_\_\_\_\_ Date(s)/time(s)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PT-to-PT OTHER**: Other critical points are mapped correctly to the DDC front-end and reflect actual system condition.

Points Checked: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tests Conducted /Results/Findings:

**Yes No N/A EEI# \_\_\_\_\_\_\_ Date(s)/time(s)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SCHEDULING:** Operating schedule matches occupancy schedule including holidays. Equipment shuts down when unoccupied as evidenced by energy internal data or walk-through (night typically).

Schedule: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tests Conducted /Results/Findings:

**Yes No N/A EEI# \_\_\_\_\_\_\_ Date(s)/time(s)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***XXX* TEMPERATURES**: *XXX* temperatures and setpoints are as efficient as possible – day, night setback, unoccupied, standby. *XXX* temperature changes in response to load or occupancy.

*XXX* Setpoints: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tests Conducted /Results/Findings:

**Yes No N/A EEI# \_\_\_\_\_\_\_ Date(s)/time(s)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**NIGHT MODE & SETBACK**: System is off. Night walkthrough and early morning reveal nothing on unless needed.

Tests Conducted /Results/Findings:

**Yes No N/A EEI# \_\_\_\_\_\_\_ Date(s)/time(s)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**OVERRIDES**: Controls, setpoints and equipment that can be easily overridden or circumvented are in normal/automatic operating mode. Examples *– XXXX*

Tests Conducted /Results/Findings:

**Yes No N/A EEI# \_\_\_\_\_\_\_ Date(s)/time(s)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CLEANINESS**: System is clean and *XXXX* and transferring heat efficiently.

Tests Conducted /Results/Findings:

**Yes No N/A EEI# \_\_\_\_\_\_\_ Date(s)/time(s)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**LOOP TUNING**: Loops are adequately tuned to prevent equipment breakdown and poor control.

Tests Conducted /Results/Findings:

**Yes No N/A EEI# \_\_\_\_\_\_\_ Date(s)/time(s)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***GENERAL INVESTIGATION CATEGORY*:** *Optimal condition.*

Tests Conducted /Results/Findings:

**Yes No EEI#\_\_\_\_\_\_\_ Date(s)/time(s)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***OTHER****: Describe other things tested/investigated.*

Tests Conducted /Results/Findings:

**Yes No EEI#\_\_\_\_\_\_\_ Date(s)/time(s)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***OTHER:*** *Describe other things tested/investigated*

Tests Conducted /Results/Findings:

**CAPITAL EE IMPROVEMENTS**

**EEI# \_\_\_\_**  *Brief Description of Capital Improvement*

Notes/Comments:

**EEI# \_\_\_\_** *Brief Description of Capital Improvement*

Notes/Comments:

**TRAINING**

**Yes No Date(s)/time(s)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Staff (occupants and O&M) fully understands how the system works.**

**Staff (occupants and O&M) fully understands how to run the systems efficiently.**

Specific Staff evaluated:

Comments:

**Specific Training needs of staff (occupants and O&M):**

**Ideas for Facility Guide/Operational Aides/Persistence:** What needs to be added (for example: sensors or specific trends, explanation on DDC graphic, or signage), provided (for example: table of VAV box CFM) or done (for example: putting check in maintenance schedule) to help the operators keep the systems operating efficiently over time?