Heat Pump Water Heater Post Evaluation Checklist

PROJECT INFORMATION						
Property Address:						
Job# or Client ID:						
Inspector Printed Name:						
Inspector QCI Certification #:						
Inspection Date:						
Local code inspection(s): (if applicable)	Permit #		Date Passed	d	_	
	Permit #		Date Passed	d	_	
ENERGY AUDIT INFORMATION						
Was an energy audit performe	d on this dwelling that included this installation?	□ Yes	□No			
If yes, was the measure of Savi	f yes, was the measure of Savings to Investment (SIR) less than 1?					

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EQUIPMENT INFORMATION						
Manufacturer:						
Model #:						
Serial #:						
Tank Size:						
Uniform Energy Factor (UEF) Rating:		 nergy Star criteri energystar.gov/	•		vater heaters key pro	<u>duct criteria</u>
Location:	□Conditione □Basement/	·	□Unconditio □Garage	ned Space □Utility Room	□Other	
Any Adjacent Heat Sources:	□None	□Furnace	□Boiler	□Other		_
COMMENTS:						

	INSTALLATION				
Yes	No	N/A		Note	
			The system is installed per work order/invoice and design documents		
			The system is installed per manufacturer specifications		
			Heat Pump Water Heater installation meets the minimum requirements set forth in SWS 7.0302.3		
			Water lines that were insulated by WAP are insulated to R3 or greater		
СОМ	MENTS	:			

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	PERFORMANCE					
Yes	No	N/A		Note		
			The condensate line is functional and connected to the drain or working			
			pump			
			No water leaks are present in the installation area			
			The air filter is clean at the time of inspection			
			At the time of inspection water heater was in:			
			☐ heat pump mode			
			☐ hybrid mode			
			The water heater is NOT in pure resistance heat mode at the time of			
			inspection			
сомі	MENTS	:				

	ELECTRICAL				
Yes	No	N/A		Note	
			The system has a dedicated circuit breaker that meets the		
			manufacturer's specifications		
			Electrical service is protected and secure per AHJ and manufacturer		
			specifications		
СОМ	MENTS	:			

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	CLIENT EDUCATION				
Yes	No	N/A		Note	
			Occupant(s), owner(s), and/or maintenance staff have been provided with the user's manual, warranty information, installation instructions, and installer contact information		
			Air filter access is clearly labeled		
СОМ	MENTS	:			

ADDITIONAL COMMEN	TS

Provide signatures on the next page.

AGENCY QUALITY CONTROL INSPECTOR

(<u>DO NOT</u> sign below until ALL MEASURES have been completed and meet requirements)

Quality Control Inspector- Print Name	QCI's BPI Number
Quality Control Inspector- Signature	Final Close-Out Date