



Limited Warranty Registration & Start-Up Sheet

This sheet is required to be filled out completely to receive the Extended Parts and Labor and Limited Warranty.			Start-Up Date:
Installing Company Name:		Installing Company Contact Name:	Installing Company Phone:
Homeowner Name:		Homeowner Address, City, State & Zip:	
Geothermal Application: <input type="checkbox"/> Forced Air <input type="checkbox"/> Hydronic		Geo Model #:	Geo Serial #:
Blower or Furnace: Blower Furnace	Brand:	Blower or Furnace Model #:	Blower / Furnace Serial #:
Coil Brand:	Coil Tonnage:	Coil Model #:	Coil Serial #:

Hydronic/Domestic Water Module	Model #:
Hybrid Cooling Module	Model #:
Desuperheater	Model #:
Cathodic Protection System	Model #:
Wall Thermostat	Model #:

- New Construction Installation**
- Retrofit Installation** (does not qualify for extended warranty)
- Replaced existing DX unit - Brand:** _____

	Heating	Cooling
*Suction Pressure		
*Suction Line Temp @ Comp		

Outdoor Temp	
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*System Evacuation		
System held 400 microns for 2 min. with Vacuum Pump		
OFF & ISOLATED?	YES	NO

	Heating	Cooling
*Discharge Pressure		
*Discharge Line Temp @ Comp		

	Heating	Cooling
*Return Air or Water In Temp		
*Supply Air or Water Out Temp		
Indoor Delta T		

*Refrigerant Type	_____
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*System Charge	_____ lbs. _____ ozs.
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	Heating	Cooling
*Liquid Press @ King Valve		
*Liquid Line Temp to Loop		

*Rated Blower CFM	
Blower Speed Setting (Cooling)	
*External Static Pressure (ESP) ¹	

	Electric @ Compressor	@ Contactor		(3 Phase)
		L1	L2	L3
*Volts				
*Amps				

¹ Reading with probe in supply & return duct at same time. (Requires 2 probe manometer.)

*Refrigerant Level in Accumulator Sightglass						
Heating	Bottom Glass		Middle Glass		Top Glass	
	1/2	Full	1/2	Full	1/2	Full
Cooling	Bottom Glass		Middle Glass		Top Glass	
	1/2	Full	1/2	Full	1/2	Full

	*Lineset Sizes	*Length	Rise or Drop
From Compressor to Air Handler			Rise _____ ft. Drop _____ ft.
From Compressor to Ground Loop			Rise _____ ft. Drop _____ ft.

These readings are REQUIRED to qualify for the Extended Parts & Labor Limited Warranty.

See the Warranty Summary Sheet for details.

Technician Name (print): _____

Technician Signature: _____

Installing Contractor - Submit this form directly to EarthLinked using one of these methods:

Fax 1-863-701-7796 | Attn: John Webster

Email: startup@earthlinked.com

n-line form at earthlinked.com/dealers/warranty

***** If this Start-Up Sheet is not submitted within 60 days after the install date, the equipment warranty reverts to 2 year parts and labor. *****