

Commissioning report air handling units

Installer / Installation constructor

Company: _____
 Contact person: _____
 Street: _____
 Postal code / City: _____
 Tel. no.: _____
 Email: _____

Equipment: _____

Equipment description: _____

Type: _____

Serial no.: _____

Operator / Location

Company: _____
 Contact person: _____
 Street: _____
 Postal code / City: _____
 Tel. no.: _____
 Email: _____
 Installing date: _____
 Commissioning date: _____

Documentation

- | | | | |
|-------------------------------------------------------------------------------------------|------------------------------|-----------------------------|--------------------------------------|
| <input type="checkbox"/> Installation, operation and maintenance instructions handed over | <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> s. Appendix |
| <input type="checkbox"/> EC Declaration handed over | <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> s. Appendix |
| <input type="checkbox"/> Air flow measuring report available | <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> s. Appendix |

Visual inspection

- | | | | |
|-------------------------------------------------------------------------------------------------------|-----------------------------------------|-----------------------------------------------|--------------------------------------|
| <input type="checkbox"/> Warning signs / Name plate present | <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> s. Appendix |
| <input type="checkbox"/> Housing damages | <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> s. Appendix |
| <input type="checkbox"/> Installation site according to the equipment specifications | <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> s. Appendix |
| <input type="checkbox"/> Suitable weatherproof for outdoor installation | <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> s. Appendix |
| <input type="checkbox"/> Electrical installation completed | <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> s. Appendix |
| <input type="checkbox"/> Condensate drain frost free and correctly installed | <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> s. Appendix |
| <input type="checkbox"/> Installation performed according to installation instructions | <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> s. Appendix |
| <input type="checkbox"/> Transported medium characteristics according to the equipment specifications | <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> s. Appendix |
| <input type="checkbox"/> Insulation works for equipment and ventilation ducts finalized | | | |
| <input type="checkbox"/> equipment | <input type="checkbox"/> outdoor air | <input type="checkbox"/> exhaust air | <input type="checkbox"/> extract air |
| <input type="checkbox"/> supply air | | | |
| <input type="checkbox"/> Filter status at commissioning | | | |
| <input type="checkbox"/> new | <input type="checkbox"/> slightly dirty | <input type="checkbox"/> replacement required | <input type="checkbox"/> unavailable |
| <input type="checkbox"/> Fire protection requirements are complied with | <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> s. Appendix |
| <input type="checkbox"/> Air dampers installed for outdoor and exhaust air | <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> s. Appendix |

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Electrical connection

Voltage:	V
Frequency:	Hz
Number of phases:	phases
Fuse:	A

Medium connection heating / cooling register

<input type="checkbox"/> Water		<input type="checkbox"/> yes	<input type="checkbox"/> no	<input type="checkbox"/> s. Appendix
<input type="checkbox"/> Salt water	_____ % glycol	<input type="checkbox"/> yes	<input type="checkbox"/> no	<input type="checkbox"/> s. Appendix
<input type="checkbox"/> Coolant	_____ type	<input type="checkbox"/> yes	<input type="checkbox"/> no	<input type="checkbox"/> s. Appendix
<input type="checkbox"/> Cooler supply temperature	_____ °C	<input type="checkbox"/> yes	<input type="checkbox"/> no	<input type="checkbox"/> s. Appendix
<input type="checkbox"/> Heater supply temperature	_____ °C	<input type="checkbox"/> yes	<input type="checkbox"/> no	<input type="checkbox"/> s. Appendix
<input type="checkbox"/> Hydraulic connections				
<input type="checkbox"/> bypass circuit	<input type="checkbox"/> admixture circuit	<input type="checkbox"/> injection circuit		

Instruction

<input type="checkbox"/> Device / system function explained and instructed	<input type="checkbox"/> yes	<input type="checkbox"/> no	<input type="checkbox"/> s. Appendix
<input type="checkbox"/> Control unit explained and instructed	<input type="checkbox"/> yes	<input type="checkbox"/> no	<input type="checkbox"/> s. Appendix
<input type="checkbox"/> Filter replacement explained and instructed	<input type="checkbox"/> yes	<input type="checkbox"/> no	<input type="checkbox"/> s. Appendix
<input type="checkbox"/> Maintenance operations explained and instructed	<input type="checkbox"/> yes	<input type="checkbox"/> no	<input type="checkbox"/> s. Appendix

Functioning control

<input type="checkbox"/> Fan impeller can be easily rotated by hand	<input type="checkbox"/> yes	<input type="checkbox"/> no	<input type="checkbox"/> s. Appendix
<input type="checkbox"/> Fan impeller / motor has the correct direction of rotation	<input type="checkbox"/> yes	<input type="checkbox"/> no	<input type="checkbox"/> s. Appendix
<input type="checkbox"/> There are vibrations / grinding noises	<input type="checkbox"/> yes	<input type="checkbox"/> no	<input type="checkbox"/> s. Appendix
<input type="checkbox"/> Equipment tested at nominal flow	<input type="checkbox"/> yes	<input type="checkbox"/> no	<input type="checkbox"/> s. Appendix
<input type="checkbox"/> Control valves cooler and heater checked	<input type="checkbox"/> yes	<input type="checkbox"/> no	<input type="checkbox"/> s. Appendix
<input type="checkbox"/> Frost protection checked	<input type="checkbox"/> yes	<input type="checkbox"/> no	<input type="checkbox"/> s. Appendix
<input type="checkbox"/> Actuators of outdoor air and exhaust air dampers checked	<input type="checkbox"/> yes	<input type="checkbox"/> no	<input type="checkbox"/> s. Appendix
<input type="checkbox"/> Functioning of additional installations checked			
preheater	<input type="checkbox"/> yes	<input type="checkbox"/> no	<input type="checkbox"/> s. Appendix
after heater	<input type="checkbox"/> yes	<input type="checkbox"/> no	<input type="checkbox"/> s. Appendix
<input type="checkbox"/> Fire protection dampers checked	<input type="checkbox"/> yes	<input type="checkbox"/> no	<input type="checkbox"/> s. Appendix
<input type="checkbox"/> Operation via			
no control unit available	<input type="checkbox"/> yes	<input type="checkbox"/> no	<input type="checkbox"/> s. Appendix
control unit Klima I	<input type="checkbox"/> yes	<input type="checkbox"/> no	<input type="checkbox"/> s. Appendix
control unit Touch I	<input type="checkbox"/> yes	<input type="checkbox"/> no	<input type="checkbox"/> s. Appendix
external control unit	<input type="checkbox"/> yes	<input type="checkbox"/> no	<input type="checkbox"/> s. Appendix
<input type="checkbox"/> Communication interface available	<input type="checkbox"/> yes	<input type="checkbox"/> no	<input type="checkbox"/> s. Appendix
<input type="checkbox"/> Control via BMS	<input type="checkbox"/> yes	<input type="checkbox"/> no	<input type="checkbox"/> s. Appendix

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Defects / Modifications / Features / Observations:

Equipment commissioning successfully completed

yes no

Equipment defects

- no defects
 minor defects, repairs without recommissioning
 serious defects, recommissioning required

Date, signature of the instructed person

Date, Signature of the commissioning company

Date, Signature of the system operator / client

ruck Ventilatoren reserves the right to operate changes and improvements on the content of this commissioning report without previous notice.

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Setting values

No.	Meaning	Values range	Individual setting	Factory setting
P 1	Minimum temperature setting on the control unit	16 °C up to 20 °C		16 °C
P 2	Maximum temperature setting on the control unit	20 °C up to 30 °C		24 °C
P 3	External activation	AUTOMATIC CONFIRMATION		AUTOMATIC
P 4	I – Component	5 up to 20		10
P 5	P – Component	5 up to 20		10
P 6	Temperature correction room temperature sensor from control unit	-5 °C up to 5 °C		0
P 7	Address	1 - 247		1
P 8	Baudrate	2400 / 4800 / 9600 / 14400		9600
P 9	Calibration supply air fan	800 - 1200		1.000
P 10	Calibration extract air fan	800 - 1200		1.000
P 13	Type	S / PV / P		S
P 14	Sensor type	NO EXTERNAL SENSOR CO2 VOC EXTERNAL CONTROL (HUMIDITY)		NO EXTERNAL SENSOR
P 15	Minimum ventilation supply air	<i>depending on size</i>		<i>depending on size</i>
P 16	Minimum ventilation extract air	<i>depending on size</i>		<i>depending on size</i>
P 17	Basic ventilation supply air	<i>depending on size</i>		<i>depending on size</i>
P 18	Basic ventilation extract air	<i>depending on size</i>		<i>depending on size</i>
P 19	Forced ventilation supply air	<i>depending on size</i>		<i>depending on size</i>
P 28	Forced ventilation extract air	<i>depending on size</i>		<i>depending on size</i>
P 20	Air quality	CO2 VOC (humidity)		1400 ppm 1400 ppm (45 %)
P 21	Type of control	Supply air temp. Extract air temp. Room air temp.		Supply air temp.
P 22	Selection heating system	HEATING COOLING HEATING AND COOLING DX-COIL		HEATING
P 23	Measuring range sensor min.	0 - 500 ppm (0 - 50 %)		0 ppm (0 %)
P 24	Measuring range sensor max.	1000 - 5000 ppm (0 - 50 %)		2000 ppm (100 %)
P 25	Supply air filter	0 - 500 Pa		100 Pa
P 26	Extract air filter	0 - 500 Pa		100 Pa
P 27	Filter calibration			
P 29	-ETA-TYP -RL-TYP -ACCU-TYP -CASE-TYP	H30/H36/V30/V36/F30/F36 RL700/900/1200/1600/2000 ACCU CASE3000/3000U...-16000U		<i>Depending on AHU type</i>
P 30	Run-on time	1 - 60 min		5 min