



ADVANTAGE AIR CONDITIONING OF THE TREASURE COAST, INC.

601 S. MARKET AVENUE - FT. PIERCE, FL 34982

STATE CERTIFICATION #CAC039664

465-1606 • PORT ST. LUCIE • FORT PIERCE • 465-5929

STUART • 335-3339 Other than Stuart, Port St. Lucie, Fort Pierce 1-800-232-1817

SERVICE REPORT

NAME _____ ADDRESS _____ DATE _____

AIR CONDITIONING MAKE _____ AIR HANDLER MAKE _____

Condenser Model Number _____ Air Handler Model Number _____

Condenser Serial Number _____ Air Handler Serial Number _____

AIR HANDLER

Size _____

Motor F.L.A. _____

Motor Amperage _____

Motor Bearing Lubricated _____

Bearings OK _____ Worn _____

Filter _____ Clean _____ Replaced _____

EVAPORATOR COIL

Coil Clean _____

Drain Line & Pan _____

Float Switch Operating _____

VISUAL LEAK CHECK

Any Sign of Oil _____

If So, Leak Check _____

MISCELLANEOUS

Unit Clean Inside & Out _____

Unit Rusting _____

Balance Thermostat _____

Calibrate Thermostat _____

Check Condensate Pump _____

All Electrical Connections Tight _____

Temperature Drop Across Coil _____

Outdoor Temperature _____

Indoor Temperature _____

CONDENSER

Head Pressure _____

Suction Pressure _____

Compressor F.L.A. _____

Compressor Amperage _____

Fan F.L.A. _____

Fan Amperage _____

Lubricate Fan Motor _____

Coil Clean _____

Contactors Points _____

Relays _____

Capacitors _____

Added Freon _____

Surge Protector _____

Time Delay _____

All Electrical Connections Tightened _____

DE-HUMIDISTAT

Wired Properly _____

Working Properly _____

ELECTRONIC AIR CLEANER

Model # _____ Serial # _____

Condition of Collection Cells _____

Cleaned _____

Condition of Pre Filter _____

Cleaned _____

Check Voltage _____ Check Safety _____

Condition of Ductwork _____

Ductwork Clean? Yes _____ No _____

ELECTRIC HEAT

KW _____

#1 _____

#2 _____

Elements _____

Fuses _____

Relays _____

Fan Limit Control _____

All Electrical Connections Tightened _____

U.V. LIGHT ASSEMBLY

Model # _____

Operating Properly _____

Wired Properly _____

Bulb Condition _____ Size _____

WHOLE HOUSE FRESH AIR/DEHUMIDIFICATION UNIT

Compressor Amps _____

F.L.A. _____ Actual _____

Fan Amperage _____

F.L.A. _____ Actual _____

Replaced Hepa Filter? _____

or Condition _____

Checked Drain System _____

Checked Outside Air Damper _____

Needs Cleaning: _____

REMARKS & OR REPAIRS NEEDED _____

AMOUNT PAID _____ SERVICE TECHNICIAN _____

INVOICE NO. **Nº 12093** CUSTOMER SIGNATURE _____