

SERVICE CHECKLIST

DATE: _____ SERVICE TECH: _____

CUSTOMER: _____

PRE-CLEAN CHECK

- | | | |
|--|-------|-------|
| 1. Blower fan works | Yes | No |
| 2. Heater works | Yes | No |
| 3. Air conditioning works | Yes | No |
| 4. Thermostat's setting | _____ | _____ |
| 5. Set thermostat to off | Yes | No |
| 6. Turn off power breaker | Yes | No |
| 7. Cover furniture & carpet in vicinity
Of work being performed | Yes | No |
| 8. Label all wires disconnected | Yes | No |
| 9. Inspect all work areas for pre-existing damage | Yes | No |

Customer's Signature: _____

COMMENTS:

POST-CLEAN CHECK

- | | | |
|---|-----|----|
| 1. Turn on power breaker | Yes | No |
| 2. Blower fan works | Yes | No |
| 3. Heater works | Yes | No |
| 4. Air conditioning works | Yes | No |
| 5. Set thermostat to original setting | Yes | No |
| 6. Remove furniture coverings | Yes | No |
| 7. Remove sponge plugs | Yes | No |
| 8. Remove all tools & equipment | Yes | No |
| 9. Vacuum carpet as needed | Yes | No |
| 10. Complete paperwork & collect payment | Yes | No |
| 11. Walk through all work areas with customer | Yes | No |

I have verified that upon Air Care's departure the heating and air conditioning were both in working order.

Customer's Signature: _____