

Crossover Startup Report

Carrier	Ente	rprise
Technic	al Se	ervices

Site Name:

Startup Date: Install Date:

Contractor:

Tech Name:

Equipment Brand:

Address:	Address:			
City, State:	City, State:			
Zip:	Zip:			
Contact:	Contact:			
Phone:	Phone:			
Outdoor Unit Md.:	Serial:			
Indoor Unit Md.:	Serial:			
Control Scenario: 1 2 3				
Type of Control: KSACN1201AAA 1401/1501	24-Volt Model of Thermostat:			
DIP Switch Settings: DIP ON is Checked / OFF is	Unchecked:			
Indoor Unit – SW1: 1 2 3 4 SW2: 1	2 3 4 SW3: 1 2 3 4			
SW4: 1 2 3 4 SW5: 1 2 3 4	S4: 1 2 3 4 SW2-4: S3:			
If KSACN1401/1501AAA, are there more than one? Yes No # of 1401/1501's				
Is each S1 a different address? Yes No How many MU(A,H)As are connected?				
Outdoor Unit – S1: 1 2 3 4				
Line Set Information: New Existing	Liquid Size: Suction Size:			
Length: Additional Refrigerant Charge:	Oz.			
Outdoor Temp at Startup: °F	Indoor Temp at Startup: °F			
Additional Refrigerant Charge Amount Added:	oz.			
Cooling Mode – High Pressure: PSIG	G / Low Pressure: PSIG			
Heating Mode – High Pressure: PSIGNote: Measure after 20 min. of operation, not all units have both refrigerar				
Outdoor Unit Power Supply: L1-L2: Volts / L	1-G Volts / L2-G Volts			
Indoor Unit Power Supply L1-L2: Volts / L	1-G Volts / L2-G Volts			
Additional Comments / Service Settings Preformed:				