

DATE     WORK ORDER #

TECH: \_\_\_\_\_



# GAS SYSTEM PERFORMANCE REPORT

**Summers & Zim's, Inc.**  
 403 Valley Ave, P.O. Box 220  
 Atglen, Pa 19310-0220  
 (610) 593-5129 www.sumzim.com

NAME: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_  
 CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

Manufacturer \_\_\_\_\_ Model # \_\_\_\_\_ Serial # \_\_\_\_\_  
 Fuel:  Natural  Propane Manifold Pressure: \_\_\_\_\_

	Good	Bad	N/A		Good	Bad	N/A
Energy saving thermostat installed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Air filter: <input type="checkbox"/> Changed <input type="checkbox"/> Cleaned Size: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Batteries replaced	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Air purification	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Thermostat secured to wall	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Humidifier: Pad Type _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Condition of ductwork	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Flush M & M control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Combustion report	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Drain expansion tank	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Clean Chimney Base	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Boiler pressure _____ #	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Check Vent Pipe	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Boiler temperature _____ °F	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Check Heat Exchanger	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Boiler relief	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pre-Purge Cycle	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Auto fill	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Auto Ignition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Line voltage wiring	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Standing Pilot	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Low voltage wiring	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Flame	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Zone valves	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Burner Tubes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Circulators	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Safety Controls	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Supply air temp _____ °F	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fan Delay	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Return air temp _____ °F	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Condensate Pump	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Split _____ °F	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trap on High Eff. Units	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All return loops	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Blower wheel condition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Panels on	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Blower Motor _____ A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Vents sealed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Capacitor _____ MF	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Switch on	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Barometric damper operation _____ " WC	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Vacuum around unit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Spill switch installed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Attach/Sign S&Z sticker	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### ADDITIONAL INSTALLATIONS/PROPOSED WORK

PART #	DESCRIPTION OF ATTENTION NEEDED	Work Done	Standard Rate	Club Rate
		Yes / No	\$	\$
		Yes / No	\$	\$
		Yes / No	\$	\$
		Yes / No	\$	\$
		Yes / No	\$	\$

### ADDITIONAL NOTES/INSTRUCTIONS

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

ACCEPTANCE OF WORK PREFORMED: I acknowledge satisfactory completion of the above described work and that the premises has been left in satisfactory condition. I understand that if my check does not clear, I am liable for the check and any charges from the bank. I agree to pay 1.75% per month for past due contracts (minimum sharge of \$15). In the event that collection efforts are initiated against me, I shall pay for all associated fees at the posted rates as well as all collection fees and reasonable attorney fees. I agree that the amount set forth in the space marked "Total Amount Due" is the upfront price I have agreed to.

TECHNICIAN'S SIGNATURE _____ <b>X</b>	CUSTOMER'S SIGNATURE _____ <b>X</b>
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**CAPTURING THE HEARTS OF CUSTOMERS FOR LIFE**

Thank you very much for your business!

Please call if you have any questions about the work we have completed or estimated for you.  
 Work Proposals are valid for 30 days