

C3.1: Manager's IAQ Inspections: AHU

Building _____ Location _____ Prepared by _____ Date _____
 Equipment _____ Manufacturer _____ Other ID _____ File # _____

Parameter	Condition		Notes	Priority
	OK	Not OK		L M H
Outdoor Air Intake				
Birdscreen OK?				
Air flow unobstructed?				
No close by pollutant sources?				
Mixing Plenum: Clean?				
Coils and Condensate Pans:				
Clean, no corrosion?				
No odors?				
No microbial growth?				
Pans draining, traps filled?				
Humidifiers:				
Clean?				
No standing water or overflow?				
No microbial growth or mineral deposits?				
Controls:				
Set points OK?				
Functioning?				
Fans:				
Clean, no corrosion?				
No excess vibration?				
Belts OK?				
No excess noise or vibration?				
No Leakage?				
Pressurization OK?				
Filters				
General condition OK?				
Installed properly (no bypass)?				
No odors/visible pollution?				