

Part 1 – System details and declarations

The installer should complete this section and include details of the commissioning engineer.

1.1 Installation address details	
Dwelling name/number	
Street	
Locality	
Town	
County	
Post Code	
1.2 System details	
System classification*	System
Enter "natural ventilation", "mechanical extract ventilation" or "as defined by Approved Document F".	
Manufacturer	
Model numbers	
Serial number (where available)	
Location of fan units	1. 2. 3. 4. 5.
1.3 Installation engineer's details	
Engineer's Name	
Company	
Address Line 1	
Address Line 2	
Postcode	
Telephone Number	
1.4 Commissioning engineer's details (if different to 1.3)	
Engineer's Name	
Company	
Address Line 1	
Address Line 2	
Postcode	
Telephone Number	

*NOTE: If a system has been installed that is not defined in Approved Document F, further installation checks and commissioning procedures may be required. Seek guidance from the manufacturer for such systems.

Part 2a – Installation details

The installer should complete this section before commissioning is carried out.

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2a.1 Installation checklist – general (all systems)		Tick as appropriate	
Has the system been installed in accordance with manufacturer's requirements?		Yes	No
Have paragraphs 1.12 to 1.83 ⁽¹⁾ been followed (if relevant)?		Yes	No
If there are any deviations from paragraphs 1.12 to 1.83, give details here			
Description of installed controls (e.g. timer, central control, humidistat, occupancy sensor, thermal bypass, if applicable, etc.)			
Location of manual / override controls			
2a.2 Installation engineer's declaration			
Engineer's Signature			
Registration Number (if applicable)			
Date of Inspection			

NOTE:

1. All references to tables and paragraphs are to Approved Document F, Volume 1: Dwellings.

Part 2b – Inspection of installation

The commissioning engineer should complete this section before completing Part 3.

2b.1 Visual inspections – general (all systems)		
What is the total installed equivalent area of background ventilators in the dwelling?		mm ²
What is the total floor area of the dwelling?		m ²
Does the total installed equivalent ventilator area meet the standards detailed in Table 1.7 or paragraph 1.57 ⁽¹⁾ , as appropriate?	Yes	No
Have all background ventilators been left in the open position?	Yes	No
Have the correct number and location of extract fans/terminals been installed to satisfy the standards in Table 1.1 or Table 1.2, as appropriate?	Yes	No
Is the installation complete, with no obvious defects?	Yes	No
Do all internal doors have enough undercut to allow air transfer between rooms as detailed in paragraph 1.25 (i.e. 10mm above the floor finish or 20mm above the floor surface)?	Yes	No
Has all protection/packaging been removed (including from background ventilators), so that the system is fully functional?	Yes	No
Are systems clean internally and externally?	Yes	No
Has the entire system been installed to allow access for routine maintenance and to repair/replace components?	Yes	No
2b.2 Visual inspections – general (continuous mechanical extract ventilation and mechanical ventilation with heat recovery systems only)		
Have appropriate air terminal devices been installed to allow system balance?	Yes	No
Have the heat recovery unit and all ductwork been effectively insulated and sealed for all heated and unheated spaces?	Yes	No
Is the condensate connection complete and does the condensate drain to an appropriate location (mechanical ventilation with heat recovery only)?	Yes	No
Are filters installed?	Yes	No
For ducted systems, has the ductwork been installed so that air resistance and leakage is kept to a minimum?	Yes	No
2b.3 Other inspections – general (all systems)		
At initial start-up, was there any abnormal sound or vibration, or unusual smell?	Yes	No
During continuous operation, was there any excessive noise?	Yes	No

NOTE:

1. All references to tables and paragraphs are to Approved Document F, Volume 1: Dwellings.

Part 3 – Commissioning details

The commissioning engineer should complete this section after completing Part 2b.

3.1 Commissioning Equipment				
Schedule of air flow measurement equipment used (model and serial)			Date of last UKAS calibration	
1.				
2.				
3.				
3.2 Air Flow Measurements – Intermittent extract fans only				
Fan reference (from section 1.2 above)	Measured Extract Rate (l/s)	Design extract rate (l/s) Refer to Table 1.1 ⁽¹⁾		
Extract Fan 1.				
Extract Fan 2.				
Extract Fan 3.				
Extract Fan 4.				
Extract Fan 5.				
<i>For cooker hoods, only the highest setting needs to be recorded.</i>				
3.3 Air flow measurements (extract) – continuous mechanical extract ventilation and mechanical ventilation with heat recovery only				
Room reference (location of terminals)	Measured air flow – high rate (l/s)	Design air flow – high rate (l/s) Refer to Table 1.2	Measured air flow – continuous rate (l/s)	Design air flow – continuous rate (l/s) Refer to Table 1.3
Kitchen.				
Bathroom				
En Suite				
Utility				
Other...				
Other...				
Other...				
3.4 Air flow measurements (supply) – mechanical ventilation with heat recovery only				
Room reference (location of terminals)	Measured air flow – high rate (l/s)	Design air flow – high rate (l/s) Refer to Table 1.2	Measured air flow – continuous rate (l/s)	Design air flow – continuous rate (l/s) Refer to Table 1.3
Living Room 1				
Living Room 2				
Dining Room				
Bedroom 1				
Bedroom 2				
Bedroom 3				
Bedroom 4				
Bedroom 5				
Study				
Other...				
3.5 Commissioning engineer's declaration				
Engineer's signature				
Registration number (if applicable)				
Date of commissioning				

NOTE:

1. All references to tables and paragraphs are to Approved Document F, Volume 1: Dwellings.