



HOME PERFORMANCE UPGRADE CHECKLIST
SOLAR WATER HEATER INSTALLATION

SunState Account# _____

Permit # _____

TYPE OF SYSTEM		
<input type="checkbox"/> Passive	<input type="checkbox"/> Active	<input type="checkbox"/> Direct (Open Loop)
<input type="checkbox"/> Flat plate	<input type="checkbox"/> ICS/Batch	<input type="checkbox"/> Indirect (Closed Loop)
<input type="checkbox"/> Evacuated tube	<input type="checkbox"/> Thermosyphon	
Collector Area: _____ sqft	Collector Model: _____	Manufacturer: _____
Tank Capacity: _____ gal	Tank Model: _____	Manufacturer: _____
FSEC ID#: _____	EFF (North): _____	

INSTALLATION
<input type="checkbox"/> Average daily direct sunlight on collector(s) _____ HRS
<input type="checkbox"/> Collector(s) pitch (angle) _____ degrees
<input type="checkbox"/> Collector(s) bearing (compass heading) _____ degrees (180 degrees is due south)
<input type="checkbox"/> Anti-freeze sensor installed on drainback systems
<input type="checkbox"/> Air vent installed and insulated to prevent vacuum in collector
<input type="checkbox"/> Hot water return lines and cold water supply lines insulated
<input type="checkbox"/> Collector(s), support structures and piping properly mounted and secured
<input type="checkbox"/> Pressure relief valve operation verified
<input type="checkbox"/> Mixing valve (tempering valve) installed on passive ICS systems
<input type="checkbox"/> All roof penetrations sealed and/or flashed properly

NOTES

HOMEOWNER ORIENTATION
<input type="checkbox"/> Discussed the system operation with homeowner
<input type="checkbox"/> Discussed the required system maintenance with homeowner

The contractor has answered all questions regarding the checklist. I understand the checklist is NOT a guarantee of quality or performance but a guide to ensure key items have been addressed and discussed.

Contractor:	Date:
Sign	Print
Homeowner:	Date:
Sign	Print