

**Reciprocating Compressor Installation Sheet**

Date of Installation \_\_\_\_\_ Compressor Model# \_\_\_\_\_

Installation Company \_\_\_\_\_ Compressor Serial # \_\_\_\_\_

Installation Technician \_\_\_\_\_ Compressor Voltage \_\_\_\_\_

Site Electrical Phase \_\_\_\_\_ Site Voltage L1 \_\_\_\_\_ L2 \_\_\_\_\_ L3 \_\_\_\_\_

Compressor Electrical breaker size \_\_\_\_\_

Incoming Voltage at motor start up L1 \_\_\_\_\_ L2 \_\_\_\_\_ L3 \_\_\_\_\_

Incoming Voltage at max operating pressure L1 \_\_\_\_\_ L2 \_\_\_\_\_ L3 \_\_\_\_\_

Incoming power connected to Magnetic Starter \_\_\_\_\_

Breaker size for the compressor \_\_\_\_\_ AMPS Wire size for the compressor \_\_\_\_\_

Distance from main electric panel \_\_\_\_\_ Disconnect installed at the compressors site \_\_\_\_\_

If Duplex compressor separate disconnects for each drive motor:  Yes  No

Compressor Rotation Correct  Yes  No

Motor amps at max operating Pressure L1 \_\_\_\_\_ L2 \_\_\_\_\_ L3 \_\_\_\_\_

Compressor Max Operating Pressure \_\_\_\_\_ Compressor tank drain functional \_\_\_\_\_

Unit inspected for Air leaks \_\_\_\_\_ Unit inspected for Oil leaks \_\_\_\_\_

Unit location:  Indoors  Outdoors

Unit tank fill time 0-125psi \_\_\_\_\_ (Put N/A if pressure not applicable to installed unit)

Unit tank fill time 0-150psi \_\_\_\_\_ (Put N/A if pressure not applicable to installed unit)

Unit tank fill time 0-175psi \_\_\_\_\_ (Put N/A if pressure not applicable to installed unit)

Belt tension checked:  Yes  No Vibration Pads properly installed:  Yes  No

All installation steps completed:  Yes  No If no, reason: \_\_\_\_\_

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

Send copy of completed installation sheet to manufacturer to begin warranty  
Compressed Air Systems, LLC  
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