

HVAC Maintenance Form

Location	
Tehnician	
Date	

Name of the customer/property owner	
Address	
Contact information	

Maintenance Tasks

Air Filter	
Checked for cleanliness	<input type="checkbox"/>
Replaced if necessary	<input type="checkbox"/>
Filter type	
Date of replacement	

Thermostat	
Inspected for accuracy	<input type="checkbox"/>
Calibrated if needed	<input type="checkbox"/>
Any issues or recommendations	

Indoor Unit	
Checked for damage or leaks	<input type="checkbox"/>
Airflow obstruction : Yes / No	
Actions taken (if any)	

Outdoor Unit	
Cleared of debris and vegetation	<input type="checkbox"/>
Coils cleaned : Yes / No	
Actions taken (if any)	

Condensate Drain	
Inspected for clogs or blockages	<input type="checkbox"/>
Cleared if necessary	<input type="checkbox"/>
Actions taken (if any)	

Electrical Connections	
Inspected for tightness	<input type="checkbox"/>
Any loose wires or damaged connections: Yes / No	
Actions taken (if any)	

Lubrication	
Lubricated moving parts as recommended	<input type="checkbox"/>
Parts lubricated	

Refrigerant Levels	
Checked and measured	<input type="checkbox"/>
Refrigerant level within specifications: Yes / No	
Actions taken (if any)	

System Performance	
Tested for proper operation	<input type="checkbox"/>
Airflow, temperature, and performance	
Actions taken (if any)	