CERTIFICATE OF ACCEPTANCE	NRCA-PRC-07-F
Refrigerated Warehouse Variable Speed Compressor Acceptance	(Page 1 of 2)

Project Name:	Enforcement Agency:	Permit Number:
Project Address:	City:	Zip Code:

Compliance Results: **COMPLIES DOES NOT COMPLY**	Enforcement Agency Use: Checked by/Date

Intent:	*Verify that applicable compressors control compressor speed in response to the refrigeration load.*

A. Construction Inspection (NA7.10.4.1)

☐	a.	All single open-drive screw compressors dedicated to a suction group have variable speed control.
☐	b.	All pressure and temperature sensors read accurately.
☐	c.	All sensor readings used by the condenser controller convert or calculate to the correct conversion units at the controller
☐	d.	Compressor speed controls are operational and connected to compressor motors.
☐	e.	All speed controls are in "auto" mode.
☐	f.	Compressor panel control readings for "RPMs," "% speed," "kW", and "amps" match the readings from the PLC or other control systems.

Construction Inspection Compliance: ◯ Complies   ◯ Does Not Comply

B. Functional Testing (NA7.10.4.2)

The system cooling load must be sufficiently high to run the test. Artificially increase or decrease evaporator loads (add or shut off zone loads, change setpoints, etc.) as may be required to perform the Functional Testing.

Step 1: Override any conflicting controls before performing the Functional Tests.

Step 2: Document current suction operation and setpoints

a. Current operating suction pressure or saturated suction temperature (SST)	psig
	°F

Step 3: Set the test suction setpoint.

a. Document the current suction pressure or SST setpoint	psig
	°F

Program into the control system a target setpoint equal to the current operating condition measured in Step #2. Allow 5 minutes for system to normalize.

Step 4: Raise the test suction setpoint in small increments until the compressor controller modulates to decrease compressor speed.	
a. Compressor speed decreases.	P / F
b. Compressor speed continues to decrease to minimum speed.	P / F
c. Any slide valve or other unloading means does not unload until after the minimum speed is reached	P / F
Step 5: Lower the test suction setpoint in small increments until the compressor controller modulates to increase compressor speed.	
a. Any slide valve or other unloading first goes to 100% before compressor increases from minimum speed.	P / F
b. Compressor begins to increase speed.	P / F
c. Compressor speed continues to increase to 100%.	P / F
Step 6: Restore suction setpoints back to original setting as documented in Step #3.	P / F
Step 7: Restore any controls disabled in step #1.	P / F

Functional Testing Compliance: ◯ Complies   ◯ Does Not Comply

CERTIFICATE OF ACCEPTANCE	NRCA-PRC-07-F
Refrigerated Warehouse Variable Speed Compressor Acceptance	(Page 2 of 2)

Project Name:	Enforcement Agency:	Permit Number:
Project Address:	City:	Zip Code:

DOCUMENTATION AUTHOR'S DECLARATION STATEMENT

1. I certify that this Certificate of Acceptance documentation is accurate and complete.

Documentation Author Name:	Documentation Author Signature:
Documentation Author Company Name:	Date Signed:
Address:	CEA/HERS/ATT Certification Identification (If applicable):
City/State/Zip:	Phone:

FIELD TECHNICIAN'S DECLARATION STATEMENT

I certify the following under penalty of perjury, under the laws of the State of California:

1. The information provided on this Certificate of Acceptance is true and correct.
2. I am the person who performed the acceptance verification reported on this Certificate of Acceptance (Field Technician).
3. The construction or installation identified on this Certificate of Acceptance complies with the applicable acceptance requirements indicated in the plans and specifications approved by the enforcement agency, and conforms to the applicable acceptance requirements and procedures specified in Reference Nonresidential Appendix NA7.
4. I have confirmed that the Certificate(s) of Installation for the construction or installation identified on this Certificate of Acceptance has been completed and signed by the responsible builder/installer and has been posted or made available with the building permit(s) issued for the building.

Field Technician Name:	Field Technician Signature:	
Field Technician Company Name:	Position with Company (Title):	
Address:	CEA/HERS/ATT Certification Identification (If applicable):	
City/State/Zip:	Phone:	Date Signed:

RESPONSIBLE PERSON'S DECLARATION STATEMENT

I certify the following under penalty of perjury, under the laws of the State of California:

1. I am the Field Technician, or the Field Technician is acting on my behalf as my employee or my agent and I have reviewed the information provided on this Certificate of Acceptance.
2. I am eligible under Division 3 of the Business and Professions Code in the applicable classification to accept responsibility for the system design, construction or installation of features, materials, components, or manufactured devices for the scope of work identified on this Certificate of Acceptance and attest to the declarations in this statement (responsible acceptance person).
3. The information provided on this Certificate of Acceptance substantiates that the construction or installation identified on this Certificate of Acceptance complies with the acceptance requirements indicated in the plans and specifications approved by the enforcement agency, and conforms to the applicable acceptance requirements and procedures specified in Reference Nonresidential Appendix NA7.
4. I have confirmed that the Certificate(s) of Installation for the construction or installation identified on this Certificate of Acceptance has been completed and is posted or made available with the building permit(s) issued for the building.
5. I will ensure that a completed, signed copy of this Certificate of Acceptance shall be posted, or made available with the building permit(s) issued for the building, and made available to the enforcement agency for all applicable inspections. I understand that a signed copy of this Certificate of Acceptance is required to be included with the documentation the builder provides to the building owner at occupancy.

Responsible Acceptance Person Name:	Responsible Acceptance Person Signature:	
Responsible Acceptance Person Company Name:	Position with Company (Title):	
Address:	CSLB License:	
City/State/Zip:	Phone:	Date Signed: