

Cover Sheet

**FIELD TECHNICAL EVALUATION  
FORM  
Page 1**

**DATE:** \_\_\_\_\_

Distributor Name:	Dealer Name:
Address:	Address:
City & State:	City & State:
Zip Code                      TEL:	Zip Code                      TEL:

HM Name:
Address:
City & State:
Zip Code                      TEL:

Model Number		Serial Number		Date installed
Model Number		Serial Number		Date installed
Model Number		Serial Number		Date installed
Model Number		Serial Number		Date installed
Model Number		Serial Number		Date installed

Reason for field investigation:


**The Technical Evaluation Form** is to be completed anytime a request for assistance from any International Comfort Products Technical Staff is made. This Document has a detailed list of questions that are designed to help narrow down the possible reasons for a product not operating or performing as expected. All questions on this form are important and none should be unanswered unless otherwise stated by ICP technical staff.

This form is intended to maximize the effectiveness of the technical support staff at ICP as well as the efforts of the TSA by insuring that all necessary information is at hand when technical support is requested.

**Note:** This sheet should accompany: Gas furnace, Oil Furnace, and Heat Pump troubleshooting questionnaires.