OMB Control Number: 1910-1400 (Expiration Date: XXXXXX XX, XXXX) DOE F 220.60

Product Type: Refrigeration Systems for Walk-In Coolers and Freezers

Click here for instructions for completing this form

Each Importer and U.S. Manufacturer is legally required to <u>certify</u> the compliance of the products it imports, produce This certification may be <u>submitted</u> by the Importer or U.S. manufacturer or by a Third Party Repr

Certifier - Party Legally Obligated to Certify Compliance			Submitter -
The party responsible for <u>ce</u>	rtification is (select one only):		The party <u>submi</u>
) a U.S. Manufacturer) an Importer	Please enter required data		o the Certifier (Information b o a Third Party forms on file
Certifier Contact Inf	ormation		Third Party
Full Legal Name of Individual		Please enter required data	Full Legal Name c
Full Legal Name of Company		Please enter required data	Full Legal Name c
Complete Company Mailing Address		Please enter required data	Complete Company Mail
Phone Number		Please enter required data	Pho
Email Address		Please enter required data	Em

Compliance Statement

Select one of the options for 'Submitter - Party Submitting This Report' above

Submitter Signature (Type your Full Legal Name) Please enter required data

Date (MM

OMB Control Number: 1910-1400 (Expiration Date: XXXXXX XX, XXXX)

Paperwork Reduction Act Statement

OMB Burden Disclosure Statement

This data is being collected for manufacturers to certify compliance to DOE's energy conservation, water conservation, c monitor compliance with the energy conservation, water conservation, and design standards and testing requirements fo mandated by the Energy Policy and Conservation Act, as amended.

Public reporting burden for this collection of information is estimated to average 35 hours per response, including the tim maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this including suggestions for reducing this burden, to Office of the Chief Information Officer, Records Management Division, Energy, 1000 Independence Ave SW, Washington, DC, 20585-1290; and to the Office of Management and Budget (OM 20503.

Notwithstanding any other provision of the law, no person is required to respond to, nor shall any person be subject to a requirements of the Paperwork Reduction Act unless that collection of information displays a currently valid OMB control

Submission of this data is mandatory.

Version 5.x

Status of This Certification Sheet	No Data
Overall Status of Template	No Data

s, assembles or manufactures. This party is the " $\underline{Certifier}$ " on this form. esentative. This party is the "<u>Submitter</u>" on this form. **Party Submitting This Report** tting this report is (select one only): do not complete the Third Party Representative Contact elow) enter <mark>l data</mark> y Representative (you must have valid Third Party Authorization with the Department of Energy) **Representative Contact Information, if Applicable** Please enter of Individual required data Please enter of Company required data Please enter ing Address required data Please enter ne Number required data Please enter ail Address required data

וסטויייי)	Please enter required data

r design standards. The data you supply will be used by the Department to r the consumer products and commercial and industrial equipment

e for reviewing instructions, searching existing data sources, gathering and burden estimate or any other aspect of this collection of information, IM-23, Paperwork Reduction Project (1910-1400), U.S. Department of B), OIRA, Paperwork Reduction Project (1910-1400), Washington, DC

penalty for failure to comply with a collection of information subject to the number.

Refrigeration Systems for Walk-In Coolers and Freezers - v5.x

Column Headers: Status	Manufacturer	Brand Name(s)
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Pop-Up Headers	Status	Manufacturer	Brand Name(s)

	The cells below show		
	whether there are any		
	issues with the data on		
	that line. If the status is		
	issues of the status is		
	"Error." there are issues	Enter the Manufacturer	Enter the Brand Name(s)
	with the data. See	name in the cells below.	in the cells below.
	columns to the right for		
Don Un Contonto	an indication of the		
Pop-Op Contents	lissues with the data.		

Basic Model Number Basic Model Number Covered by Basic Model	Action	Product Group Code
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Basic Model Number	Individual Model Number	Action	Product Group Code

Enter the Basic Model Number in the cells below.	Enter the Individual Model Number covered by the Basic Model in the cells below.	Enter one of following in cells below: N new model D discontinued model C correction to previous CCMS submission E submit report on existing (carryover) model F failed Industry Certification Program	Enter an integer between 1 and 9 in the cells below. See the Product Group Codes worksheet for details on product group codes.

I Sample Size (Number of Units Tested)	Is the Certification for his Basic Model Based on a Waiver of DOE's Test Procedure Requirements?	Date of Test Procedure Waiver, if Applicable	Is the Certification based upon any Exception Relief from an Applicable Standard by DOE's Office of Hearing and Appeals?
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	Answer whether the certification for the basic model was based on a waiver of DOS's test	If you enter 'yes' under "Is the certification for	Answer whether the
Enter the sample size (number of units tested) in the cells below. If the answer to the AEDM question is yes, the entry should be 0,	An affirmative answer can be either 'yes' or 'y' and a negative answer can be either 'no' or 'n'.	on a waiver of DOE's test procedure requirements?", enter the date of the waiver in the cells below. The entry should be in the M/D/YYYY format.	certification was based upon any exception relief from an applicable standard by DOE's Office of Hearing and Appeals in the cells below.
otherwise this should be an integer greater than zero.			An affirmative answer can be either 'yes' or 'y' and a negative answer can be either 'no' or 'n'.

Date of Relief, if	Certification Based on an	Name of AFDM, if	Evap Fan Motor HP #1. If
Applicable	AEDM?	Applicable	Appl

	Answer whether the		If applicable, enter the
If you enter 'yes' under "Is the certification based upon any exception relief from an applicable standard by DOE's Office of Hearing and Appeals?", enter the date of the exception relief in the cells below. The entry should be in the M/D/YYYY format.	on the use of an Alternative Efficiency Determination Method. See §429.70 for information on AEDM requirements. An affirmative answer can be either 'yes' or 'y', a negative answer can be either 'no' or 'n'.	If you enter 'yes' under "Is Certification Based on the use of an Alternative Efficiency Determination Method (AEDM)?", enter the name of the AEDM in the cells below.	Evaporator Fan Motor Horsepower #1 in the cells below. An entry must be made in each row for one or both of this column or the Condenser Fan Motor Horsepower #1 column. Entries should be a number >0.

Evaporator Fan Motors			
Number of Evaporator Fan Motors Included in System with Horsepower #1, If Applicable	If System Includes Evaporator Fan Motors with Two Different Horsepower Values, Evaporator Fan Motor Horsepower #2, If Applicable	Number of Evaporator Fan Motors Included in System With Horsepower #2, If Applicable	Condenser Fan Motor Horsepower #1, lf Applicable

# of Evap Fan Motors w/	Evap Fan Motor HP #2, If	# of Evap Fan Motors w/	Cond Fan Motor HP #1,
HP #1	Appl	HP #2	lf Appl

If applicable, enter the number of Evaporator Fan Motors with the horsepower entered in the Evaporator Fan Motor Horsepower #1 column. Entries should be an integer >0.	If the system has Evaporator Fan Motors with two different horsepower values, enter the second horsepower of Evaporator Fan Motors in the cells below. Entries should be a number >0.	If applicable, enter the number of Evaporator Fan Motors with the horsepower entered in the Evaporator Fan Motor Horsepower #2 column. Entries should be an integer >0.	If applicable, enter the Condenser Fan Motor Horsepower #1 in the cells below. An entry must be made in each row for one or both of this column or the Evaporator Fan Motor Horsepower #1 column. Entries should be a number >0.

Condenser Fan Motors			
Number of Condenser Fan Motors Included in System with Horsepower #1, If Applicable	If System Includes Condenser Fan Motors with Two Different Horsepower Values, Condenser Fan Motor Horsepower #2, If Applicable	Number of Condenser Fan Motors Included in System With Horsepower #2, If Applicable	Does the Model Incorporate All Applicable Design Requirements?

# of Cond Fan Motors w/	Cond Fan Motor HP #2,	# of Cond Fan Motors w/	Does Model Incorp
HP #1	If Appl	HP #2	Design Req'ts?

If applicable, enter the number of Condenser Fan Motors with the horsepower entered in the Condenser Fan Motor Horsepower #1 column.	If the system has Condenser Fan Motors with two different horsepower values, enter the second horsepower of Condenser Fan Motors in the cells below.	If applicable, enter the number of Condenser Fan Motors with the horsepower entered in the Condenser Fan Motor Horsepower #2 column.	Answer whether the Model incorporates all applicable design requirements in the cells below.
Entries should be an integer >0.	Entries should be a number >0.	Entries should be an integer >0.	An affirmative answer can be either 'yes' or 'y' and a negative answer can be either 'no' or 'n'.

Is this a Process Cooling Refrigeration System? (Optional) Annual Walk-In Energy Factor (AWEF)	Net Capacity (Btu/h)	Configuration Tested for Certification
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	Annual Walk-In Energy		
Process Cooling	Factor	Net Capacity	Tested Configuration

Answer whether this is a process cooling refrigeration system. This column is optional. An affirmative answer can be either 'yes' or 'y' and a negative answer can be either 'no' or 'n'. A blank cell will be treated as a negative response.	Enter the Annual Walk- In Energy Factor in Btu per Watt-hour in the cells below. This should be a number >0.	Enter the Net Capacity in Btu per hour in the cells below. This should be a number >0.	Enter one of the following in the cells below to indicate the Test Configuration: C - Condensing Unit Only U - Unit Cooler Only S - Single Package Dedicated System M - Matched-Pair A - Attached Split-System D - Detachable Single- Packaged System
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For Indoor Dedicated Condensing Refrigeration Systems, Is the Basic Model Also Certified as an Outdoor Dedicated Condensing Refrigeration System?, If Applicable	If the Indoor Dedicated Condensing Refrigeration System is Also Certified as an Outdoor Dedicated Condensing Refrigeration System, Enter Basic Model Number for the Corresponding Outdoor Dedicated Condensing Refrigeration System, If Applicable	Annual Walk-In Energy Factor (AWEF) Using Adaptive Defrost, Optional if Applicable	Is the Basic Model Designed for Use with CO ₂ as a Refrigerant?
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In/Outdoor Dedicated			Designed for use w/
Cond. Sys.	Outdoor Dedicated Cond. Sys.	AWEF - Adaptive Defrost	CO ₂ ?

For Indoor Dedicated Condensing Systems only, answer if the basic model was also certified as an Outdoor System in the cells below. An affirmative answer can be 'yes' or 'y' and a negative answer can be 'no' or 'n'.	If you enter 'yes' in the previous column, enter the Corresponding Outdoor Dedicated Condensing Unit Basic Model Number in the cells below.	Optionally, low temperature equipment may enter the Annual Walk-In Energy Factor using Adaptive Defrost in Btu per Watt-hour in the cells below. This should be a decimal number greater than zero.	Answer whether the Basic Model is designed for use with CO2 as a refrigerant in the cells below. An affirmative answer can be either 'yes' or 'y' and a negative answer can be either 'no' or 'n'.

Does the Dedicated Condensing System Use Flooded Head Pressure Controls? (if Applicable) Compressor Break-In Period (Hours) Supplemental Testin Instructions PDF Filename	ng
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Flooded Head Pressure	Compressor Break-In	Testing Instructions
Controls?	Period	Filename

For Dedicated Condensing Refrigeration Systems only, answer whether the system uses flooded head pressure controls in the cells below. An affirmative answer can be either 'yes' or 'y' and a negative answer can be either 'no' or 'n'.	Enter the Compressor Break-In Period in hours in the cells below. If there is no compressor break-in period, enter '0'. The entry should be a decimal number greater than or equal to zero.	Enter the name of the PDF file containing supplemental testing instructions. See 429.53(b)(4) for req'd contents. First 7 characters of the filename must be in the form of "DOExxxx" where "xxxx" is four- digit numerical code assigned to the manufacturer
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The following is a description of each product group code:

	Product Group Code Description		
Product Group Code	Refrigeration System Type	Refrigeration System Net Capacity (Btu/h)	
1	Dedicated Condensing System - Medium Temperature, Indoor	All	
2	Dedicated Condensing System - Medium Temperature, Outdoor	All	
3	Dedicated Condensing System - Low Temperature, Indoor	< 6,500	
4	Dedicated Condensing System - Low Temperature, Indoor	>= 6,500	
5	Dedicated Condensing System - Low Temperature, Outdoor	< 6,500	
6	Dedicated Condensing System - Low Temperature, Outdoor	>= 6,500	
7	Unit Cooler - Medium Temperature	All	
8	Unit Cooler - Low Temperature	< 15,500	
9	Unit Cooler - Low Temperature	>= 15,500	