

**GREENHOUSE AND ENERGY  
MINIMUM STANDARDS (GEMS)  
PRODUCT REGISTRATION  
APPLICATION QUESTIONS**

**CHILLERS**

**NEW ZEALAND**

**Per AS/NZS 4776.2:2008**

**August 2019**

**This form is designed for applicants' internal use only, not for submitting applications to the GEMS Regulator.**

**All applications for product registration must be submitted to the Regulator via the online registration database at <https://reg.energyrating.gov.au>.**

**The Regulator cannot accept any applications in hard copy.**

**Note that this form may be updated from time to time to reflect changes to the registration database and it is the applicant's responsibility to ensure they are using the latest version.**

**Any question with an asterisk (\*) next to it is mandatory.**

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## VERSION CONTROL

<b>Revision Date</b>	<b>Version</b>	<b>Summary of Changes</b>
30 August 2019	1.1	EECA logo updated.
24 March 2017	1.0	Document finalised.
28 February 2017	0.1	Initial document created.

# **MODELS AND MANUFACTURER**

## **Product Model Information**

Fill in one of the two boxes below, depending on if the product being registered is a single model or a family of models.

### **FOR SINGLE MODELS**

Model Number:\* \_\_\_\_\_ Brand:\* \_\_\_\_\_

### **FOR FAMILY OF MODELS**

What is the family name of the models covered by this application?\*

\_\_\_\_\_

Please provide details for each model covered by this registration:

**#1**

Model Number:\* \_\_\_\_\_

Brand:\* \_\_\_\_\_

**#2**

Model Number:\* \_\_\_\_\_

Brand:\* \_\_\_\_\_

**#3**

Model Number:\* \_\_\_\_\_

Brand:\* \_\_\_\_\_

**#4**

Model Number:\* \_\_\_\_\_

Brand:\* \_\_\_\_\_

**#5**

Model Number:\* \_\_\_\_\_

Brand:\* \_\_\_\_\_

**#6**

Model Number:\* \_\_\_\_\_

Brand:\* \_\_\_\_\_

**#7**

Model Number:\* \_\_\_\_\_

Brand:\* \_\_\_\_\_

**#8**

Model Number:\* \_\_\_\_\_

Brand:\* \_\_\_\_\_

**#9**

Model Number:\* \_\_\_\_\_

Brand:\* \_\_\_\_\_

**#10**

Model Number:\* \_\_\_\_\_

Brand:\* \_\_\_\_\_

## Manufacturing Information

Tick if the product is manufactured in-house

Please provide the following information on the manufacturer if the product is not manufactured in-house. Additional fields are included if there are more than one manufacturer for this product.

**Manufacturer Name:\*** \_\_\_\_\_

**Manufacturer ABN or Company Number:\*** \_\_\_\_\_

**Name of Contact Person:\*** \_\_\_\_\_

**Company Phone:\*** \_\_\_\_\_ **Company Fax:** \_\_\_\_\_

**Company Email:\*** \_\_\_\_\_ **Company Website:** \_\_\_\_\_

**Street Address:\*** \_\_\_\_\_

**Suburb/Region:\*** \_\_\_\_\_ **Postal Code:\*** \_\_\_\_\_ **State/Region:** \_\_\_\_\_

**Country:\*** \_\_\_\_\_

Is postal address the same as the street address?  Yes  No

***If you have ticked No, please complete the postal address fields below:***

**Postal Address:** \_\_\_\_\_

**Suburb/Region:\*** \_\_\_\_\_ **Postal Code:\*** \_\_\_\_\_ **State/Region:** \_\_\_\_\_

**Country:\*** \_\_\_\_\_

## **Second Manufacturer**

If applicable, who is the second manufacturer?

**Manufacturer Name:\*** \_\_\_\_\_

**Manufacturer ABN or Company Number:\*** \_\_\_\_\_

**Name of Contact Person:\*** \_\_\_\_\_

**Company Phone:\*** \_\_\_\_\_ **Company Fax:** \_\_\_\_\_

**Company Email:\*** \_\_\_\_\_ **Company Website:** \_\_\_\_\_

**Street Address:\*** \_\_\_\_\_

**Suburb/Region:\*** \_\_\_\_\_ **Postal Code:\*** \_\_\_\_\_ **State/Region:** \_\_\_\_\_

Country:\* \_\_\_\_\_

Is postal address the same as the street address?  Yes  No

**If you have ticked No, please complete the postal address fields below:**

Postal Address: \_\_\_\_\_

Suburb/Region:\* \_\_\_\_\_ Postal Code:\* \_\_\_\_\_ State/Region: \_\_\_\_\_

Country:\* \_\_\_\_\_

### **Third Manufacturer**

If applicable, who is the third manufacturer?

Manufacturer Name:\* \_\_\_\_\_

Manufacturer ABN or Company Number:\* \_\_\_\_\_

Name of Contact Person:\* \_\_\_\_\_

Company Phone:\* \_\_\_\_\_ Company Fax: \_\_\_\_\_

Company Email:\* \_\_\_\_\_ Company Website: \_\_\_\_\_

Street Address:\* \_\_\_\_\_

Suburb/Region:\* \_\_\_\_\_ Postal Code:\* \_\_\_\_\_ State/Region: \_\_\_\_\_

Country:\* \_\_\_\_\_

Is postal address the same as the street address?  Yes  No

**If you have ticked No, please complete the postal address fields below:**

Postal Address: \_\_\_\_\_

Suburb/Region:\* \_\_\_\_\_ Postal Code:\* \_\_\_\_\_ State/Region: \_\_\_\_\_

Country:\* \_\_\_\_\_

In what country/countries is this product manufactured?\*

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

**How can the date of manufacture be determined from permanent markings on the appliance?\***  
**- Please tick accordingly and if required, provide further information**

From a date permanently marked on the rating plate in a non-encrypted format

**Provide an example of the date format:**

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From a date permanently marked on the rating plate in an encrypted format

**Describe how the date of manufacture can be determined from the markings on the appliance:**

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From another form of permanent marking on the product

**Describe how the date of manufacture can be determined from the markings on the appliance:**

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No date mark

## **Sale Information**

**In what country/countries will this product be sold?\*** (please tick one or both, if required)

Australia

New Zealand

**When will this product be (or when was this product) first available for purchase?\***

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## **LABS & TEST REPORTS**

Is a test report provided?\*

Yes – a test report is provided (please ensure test report is provided with this form)

**If you ticked yes, please answer the questions below:**

What test standard was used?\* (please tick one)

AS/NZS 4776.1.1:2008

AS/NZS 4776.1.2:2008

Which laboratory performed the testing?\* - please provide name of laboratory, type of lab (independent or own lab), and street and/or postal address.

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*Please provide details for each test report, if multiple test reports are provided.*

Test Report Number:\* \_\_\_\_\_

Report Signatory:\* \_\_\_\_\_

Test Date:\* \_\_\_\_\_

Test Unit Serial Number: \* \_\_\_\_\_

No – certification from AHRI or EUROVENT is provided (please ensure AHRI or EUROVENT certificate is provided with this form)

No – no test report available but registration details containing test relevant to this product provided

**If you ticked 'no test report available, but registration details provided', please answer the question below:**

Registration number of the unit whose test forms the basis of this application\*:

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Comments regarding the product, the test procedure or test results that should be taken into account when assessing the product for compliance:

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## **APPLICATION DETAILS**

Is this product being registered at standard rating conditions?\*

Yes

No

**If you ticked 'No' to the above, please answer the following questions:**

Leaving evaporator liquid temperature:\* \_\_\_\_\_ °C

Leaving condenser liquid temperature:\* \_\_\_\_\_ °C

**Registration type: \* (please tick one)**

Products certified by AHRI or Eurovent (Clause 6.2.1)

Products from a range part of which is certified by AHRI or Eurovent (Clause 6.2.2(a))

Products from a range none of which is certified by AHRI or Eurovent (Clause 6.2.2(b))

**Condenser type:\* (please tick one)**

Air-cooled

Water-cooled

**Cooling capacity for MEPS registration:\*** \_\_\_\_\_ KW



## **CERTIFICATION**

***You only need to complete this section if you ticked 'products certified by AHRI or Eurovent' as a registration type under Application Details.***

Which certified program was used?\* (please tick one)  AHRI  Eurovent

Certification or registration number:\* \_\_\_\_\_

Online certification details webpage: \_\_\_\_\_

Please attach to this paperwork:

- A copy of the certificate\*
- Selection output of the certified performance\*  Documents attached

## **PART CERTIFICATION**

***You only need to complete this section if you ticked 'products from a range part of which is certified by AHRI or Eurovent' as a registration type under Application Details.***

Is part of the range of the liquid-chilling package certified?\*  Yes  No

***If you ticked 'Yes' to the above, please answer the following questions:***

Nominate the certified range (model, capacity, Hz, etc):\*

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

Is this liquid-chilling package manufactured in the same facility as the certified range?\*  Yes  No

Which certified program was used?\* (please tick one)  AHRI  Eurovent

Certification or registration number:\* \_\_\_\_\_

Online certification details webpage: \_\_\_\_\_

Please attach to this paperwork:

- A copy of the certificate\*  Certificate attached

## **DECLARED EFFICIENCIES**

COP:\* \_\_\_\_\_ kW/kW

IPLV:\* \_\_\_\_\_ kW/kW

Does the product meet required COP?\*  Yes  No

Does the product meet required IPLV?\*  Yes  No

## **TEST REPORT DETAILS**

*You only need to complete this section if you provided a test report.*

Refrigerant type:\* (please tick one)

<input type="checkbox"/> R114	<input type="checkbox"/> R22	<input type="checkbox"/> R502	<input type="checkbox"/> R134	<input type="checkbox"/> R32	<input type="checkbox"/> R123	<input type="checkbox"/> R124
<input type="checkbox"/> R125	<input type="checkbox"/> R143A	<input type="checkbox"/> R152A	<input type="checkbox"/> R290	<input type="checkbox"/> R410A	<input type="checkbox"/> R3212560	<input type="checkbox"/> R507
<input type="checkbox"/> R14312555	<input type="checkbox"/> R404	<input type="checkbox"/> R407				

Refrigerant charge:\* \_\_\_\_\_ kg

Ambient temperature:\* \_\_\_\_\_ °C

## **EVAPORATOR**

*You only need to complete this section if you provided a test report.*

### **Entering water temperature**

Design:\* \_\_\_\_\_ °C    Test target:\* \_\_\_\_\_ °C    Test result:\* \_\_\_\_\_ °C

### **Leaving water temperature**

Design:\* \_\_\_\_\_ °C    Test target:\* \_\_\_\_\_ °C    Test result:\* \_\_\_\_\_ °C

### **Water flow rate**

Design:\* \_\_\_\_\_ L/s    Test target:\* \_\_\_\_\_ L/s    Test result:\* \_\_\_\_\_ L/s

### **Water pressure drop**

Design:\* \_\_\_\_\_ kPa    Test target:\* \_\_\_\_\_ kPa    Test result:\* \_\_\_\_\_ kPa

### **Fouling factor**

Design:\* \_\_\_\_\_ m<sup>2</sup>.k/kW    Test target:\* \_\_\_\_\_ m<sup>2</sup>.k/kW    Test result:\* \_\_\_\_\_ m<sup>2</sup>.k/kW

## **CONDENSER**

*You only need to complete this section if you provided a test report.*

### **Entering air temperature**

Design:\* \_\_\_\_\_ °C    Test target:\* \_\_\_\_\_ °C    Test result:\* \_\_\_\_\_ °C

## **COMPRESSOR**

*You only need to complete this section if you provided a test report.*

### **Input power**

**Design:\*** \_\_\_\_\_ kW    **Test target:\*** \_\_\_\_\_ kW    **Test result:\*** \_\_\_\_\_ kW

### **Frequency**

**Design:\*** \_\_\_\_\_ Hz    **Test target:\*** \_\_\_\_\_ Hz    **Test result:\*** \_\_\_\_\_ Hz

### **Voltage average**

**Design:\*** \_\_\_\_\_ V    **Test target:\*** \_\_\_\_\_ V    **Test result:\*** \_\_\_\_\_ V

### **Average current**

**Design:\*** \_\_\_\_\_ A    **Test target:\*** \_\_\_\_\_ A    **Test result:\*** \_\_\_\_\_ A

## **PERFORMANCE**

*You only need to complete this section if you provided a test report.*

### **Cooling capacity**

Design:\* \_\_\_\_\_ kW    Test target:\* \_\_\_\_\_ kW    Test result:\* \_\_\_\_\_ kW

### **Total input power**

Design:\* \_\_\_\_\_ kW    Test target:\* \_\_\_\_\_ kW    Test result:\* \_\_\_\_\_ kW

### **COP**

Design:\* \_\_\_\_\_    Test target:\* \_\_\_\_\_    Test result:\* \_\_\_\_\_

### **Test capacity**

Design:\* \_\_\_\_\_ %    Test result:\* \_\_\_\_\_ %

### **Design capacity**

Design:\* \_\_\_\_\_    Test target:\* \_\_\_\_\_    Test result:\* \_\_\_\_\_

### **Tested COP**

Design:\* \_\_\_\_\_ %    Test result:\* \_\_\_\_\_ %

### **Design COP**

Design:\* \_\_\_\_\_    Test target:\* \_\_\_\_\_    Test result:\* \_\_\_\_\_