



Market Monitoring Sheet for Air Conditioners

	Region / Province:	
Name of Store: Address: Date: Brand Name: Model Number:		
Type: □ Window	☐ Split ☐ Inverter ☐ Non-Inve	erter
Energy Label: ☐ Ye	s □ No	
Checklist 1. Is the label ir	5 1	es □ No cify where the label is located:
2. Are all the re	Star Rating: Cooling Capacity: Power Input:	vide the following information:
3. Is the overall ☐ Yes ☐ N	design (color and layout) in accorda o	ance with the requirements?
If "No", pleas	se specify:	
Remarks:		
Prepared by:	Noted by:	Conformed by:
DOE Staff	 Head of Team	Store Representative

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