Test Record for Differential Protection Record No.: Relay Relay					
Client:		Subcontractor:			
Project No.:		Subcontract P.O. No.:			
Project Name:		Substation No.:			
Additional Information:	Current setting	range:	Reference Doc	ument:	
	Selected setting:				
	Time setting rai				
	Selected setting				
	CT ratio: side 1				
Relay:					
Relay setting after test: Current setting Time setting Adhesive label provided		A			
Witnessed by:	Remark	<i>/</i> 0:			
Witnessed by: Manufacturer's representative:	Remark	15.			
Name:					
Signature:					
Date:					
Company's representative:					
Name:					
Signature: Date:					
Attachments, No. of pages:					
Accepted for Subcontracto	or	Accepted for Co	mpany	Accen	ted for Client
Name:	Name:		mpuny	Name:	
Signature:	Signatu			Signature:	
Date:	Date:			Date:	

*Company only initials for holdpoint