

# Inspection and Test Record for Emergency Generators

Record No.: \_\_\_\_\_  
page 1 of 2

Client: _____ Project No.: _____ Project Name: _____	Subcontractor: _____ Subcontract P.O. No.: _____ Emergency generator No.: _____ Model/serial No.: _____
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Additional information:	Vendor:
Reference Document:	P.O. No.:

Sequential inspection list	Subcontractor		Company		Remarks
	inspected initials/date	Hold Point	inspected* initials/date		
1.0 Nameplate date in accordance with drawings, specifications and requisitions					
2.0 Location and orientation					
3.0 Access and fixing correct					
4.0 Check diesel, generator panels and enclosure for any visible signs of damage					
5.0 Measure insulation resistance prior to starting and record					
6.0 Check electrical panel labelling					
7.0 Check pilot lamp test					
8.0 All connections are tight					
10.0 Grounding connected and tight					
11.0 Check make and type of battery					
12.0 Check load circuit					
13.0 Make visual inspection during test run and record any unusual vibration and unusual noise in "Remarks" space					

H - Company's presence is mandatory for all activities in section.  
 h - Company's presence is mandatory.

Attachments, No. of pages: \_\_\_\_\_

Accepted for Subcontractor	Accepted for Company	Accepted for Client
Name: _____	Name: _____	Name: _____
Signature: _____	Signature: _____	Signature: _____
Date: _____	Date: _____	Date: _____

\*Company only initials for holdpoint

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14.0 All the starting systems, protections, alarms, functional tests to be checked (see manufacturer's forms attached) when installation is completed with vendor and Company's Supervisor  15.0 Check and record details:  <u>Alternator:</u>  Make and type: Output: _____ KVA: Voltage: Frequency: RPM: Cos phi: Winding connections:					Attachment No. (vendor data sheet)

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