



<b>FIELD INSPECTION REPORT</b>	ITP No.:		
	Inspection Gr.		
	Report No.		
	Date		
<b>INSPECTION TYPE</b> <b>INSPECTION- OVERCURRENT/ EARTH FAULT PROTECTION RELAY (Induction Type) Test</b>	WORK No.		
	UNIT NO.		
	ITEM No.		
	LOCATION		
	DATE/NAMES/SIGNATURE		
INSPECTION NOTICE NO.:	COMPANY	CONTRACT OR	SUBCONTR
DRAWING NO(S):	/ /	/ /	/ /
DEVICE TYPE: OVERCURRENT INVERSE TIME			
MANUFACTURER:			
SWITCH BOARD NO.:			
SECTION NO.:			
MOTOR FLC:			
TAP SETTING:	SELECTED SETTING:		%
TRIP SETTING RANGE:	SELECTED SETTING:		%
TEST EQUIPMENT:			
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<b>1. Secondary Injection Test:</b>					
Nominal Injection Current $I_s$ = Tap setting $\times$ current: _____ A					
Injection Current		Operating Temp.	Trip Time(s)		Remarks
xis	A		Curve (2)	Actual	
4 $\times$	_____	Cold Warm Warm	_____	_____	All three phases connected in series  Load to trip setting 05%
2 $\times$	_____		_____	_____	
4 $\times$	_____		_____	_____	
1 $\times$	_____	Warm	Running load indication: _____ %		
<b>2. Instantaneous Elements:</b> Short Circuit / Earth fault					
1) Fuse rating: _____ A					
2) Setting: _____ $\times$ $I_n$ = _____ A					
3) Measure pick-up current: _____ A					
Note: (2) Trip time curve supplied by manufacturer.					
<b>3. Primary Injection Test:</b>					
Injection Current = 100 % FLC = _____ A					
Running Load Indication: _____ A					
<b>4. Relay setting after test:</b>					
		Tap Setting: _____		Load to Trip: _____ %	
		Inst. Setting: _____		Adhesive Label fitted: _____	
<b>Remarks and Deviations:</b>					

Legend      NA.: Not Applicable