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	ITP No.:				
FIELD INSPECTION REPORT	Inspection Gr.				
	Report No.				
Quality Control Form	Date				
INSPECTION TYPE	WORK No.				
INSPECTION H.V. SWITCHGEAR SWITCHING UNIT	UNIT NO.				
	ITEM No.				
	LOCATION				
	DATE/NAMES/SIGNATURE				
INSPECTION NOTICE NO.:	COMPANY	CONTRACTOR	SUBCONTR		
DRAWING NO(S):	/ /	/ /	/ /		
MANUFACTURER:					
G DEVICE TYPE:					
PANEL NO.					
RATING:					
TEST EQUIPMENT:					

1. Record reading of operation counter:					
2. Ins	pect the following items and report any deviations/ defects under remarks:	Yes	No		
a)	Circuit labeling correct				
b)	Operation of safety shutters.				
c)	Padlocking facilities.				
d)	Interlocking facilities – mechanical/ electrical.				
e)	Position indicators, indicating lights.				
f)	Insulating busses and barriers.				
g)	Cable box and terminations.				
h)	Alignment of main and auxiliary contacts.				
i)	Mechanical closing and tripping.				
j)	Electrical closing – local/ remote.				
k)	Electrical tripping- local/ remote.				
1)	Alarm indications- local/ remote.				
m)	Anti-condensation heater working. * Record IR at 500 Volts $M\Omega$				
n)	Secondary and auxiliary wiring. * Record IR at 500 Volts $_$ $M\Omega$				
3. Ea	rthing System: Inspect the condition of the earthing bar and connections.				
4. Re	cord fuse Type and Rating Type: Rating: :	_			
Rema	arks:	·			

Legend NA.: Not Applicable