

<b>FIELD INSPECTION REPORT</b> Quality Control Form	ITP No.:		
	Inspection Gr.		
	Report No.		
	Date		
<b>INSPECTION TYPE</b>  <b>INSPECTION- TEST</b> <b>LV BOARDS-</b> <b>KIGHTING, SMALL POWER EQUIPMENT</b>	WORK No.		
	UNIT NO.		
	ITEM No.		
	LOCATION		
DATE/NAMES/SIGNATURE			
INSPECTION NOTICE NO.:	COMPANY	CONTRACTOR	SUBCONTR
DRAWING NO(S):	/ /	/ /	/ /
MANUFACTURER:			
SECTION NO.:			
SWITCHING DEVICE TYPE:			
FUNCTION:			
RATING:			
TEST EQUIPMENT:			

1. Inspect the following items and report any deviations/ defects under remarks:	Result	Remarks								
a) Check Name Plate.										
b) Check conformity of equipment location to drawing.										
c) Inspection for damages and cleanliness of panel.										
d) Check sufficient clearance for operation and maintenance.										
e) Check base plate or support installed tightly and correctly.										
f) Check tough-up paint of support.										
g) Check leveling and fixation to foundation / support.										
h) Circuit labeling and Wire marking.										
i) Check cable connection tight.										
j) Check cable connection tight.										
k) Test insulation resistance of wiring @ 500 V.										
<b>2. I.R. Test:</b> Phase - Earth										
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 25%;">Phase – Earth</th> <th style="width: 25%;">L1 – E</th> <th style="width: 25%;">L2 – E</th> <th style="width: 25%;">L3 - E</th> </tr> <tr> <td style="text-align: center;">Value (M Ω)</td> <td></td> <td></td> <td></td> </tr> </table>	Phase – Earth	L1 – E	L2 – E	L3 - E	Value (M Ω)					
Phase – Earth	L1 – E	L2 – E	L3 - E							
Value (M Ω)										
Switching device @ 500 V:										
Record Number of Tester Used:										
<b>3. Remarks and Deviations:</b>										

Legend    NA.: Not Applicable  
**FORM NO.:** NQF - 086