

FACILITY POWER QUALITY CHECKLIST

Company Name: _____ Date: _____ Date Req'd : _____

Contact: _____ Phone: _____

Email: _____

Use an "X" to indicate occasional problems and use ■ to indicate frequent or severe problems.

Power Sources

- Transformers Over-heating Low output voltage Failure
 Over-loaded Discoloration
- Generators Instability Tripping Over-heating

Power Loads

- Capacitors Failures Blown Fuses / CBs Bulging cases
 Open Capacitor Reduced capacitance Over-heated
 Over current Over voltage
- Motors Over heated O/L tripping Bearing failures
 Winding failures High peak voltage Over current
- Drives Rectifier (diode) failure DC Bus Capacitor failures
 Nuisance Over Voltage tripping Nuisance Over Load tripping
 Excessive input harmonics

Other Loads

- UPS Tripping Repetitive Cycling (ON + OFF)
- Computers Freeze up Data loss Data interruption
 Monitor distortion
- Lighting Flickers Dims
- Bldg Automation Loses command & control Communication interference
 Timing discrepancies

Fax this form along with single line diagram and any measurement data available to:

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