

Power Factor Data Submittal

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

Contact: _____ Phone: _____

Email: _____

Transformer data: (include all that are serially upstream of the capacitor location)

	XFMR 1	XFMR 2	XFMR 3
KVA	_____	_____	_____
% Impedance	_____	_____	_____
Primary Voltage	_____	_____	_____ (L-L)
Secondary Volt.	_____	_____	_____ (L-L)

Load Data: (indicate whether HP or KW applies below)

	Across-the-line	Soft Starts
Total Motors	_____ HP / KW	_____ HP/KW

	AC – VFD	DC Drives
Total Adj. Speed Drives	_____ HP/KW	_____ HP/KW

	Fixed Capacity	Automatic Switched
Existing Capacitors	_____ kVAr	_____ kVAr

Other Loads

UPS	_____	kVA
Lighting	_____	Amps
Computers	_____	Amps
_____	_____	Amps
_____	_____	Amps
_____	_____	Amps

<u>From utility bills:</u>	KW	KVA	PF
Highest condition	_____	_____	_____
Lowest Condition	_____	_____	_____

Please submit copies of last twelve months utility bills if available.

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

16964 W. Victor Road · New Berlin, WI 53151
 Phone: 1-262-754-3883 · Fax: 1-262-754-3993