**Site Information**

Company:

Location:



151 Richmond St. S.W., PO Box 519  
Hensall, Ontario, N0M 1X0  
Ph: 519-262-2822 Fax: 519-262-2310  
Email: info@cosphi.com

# General Facility Information

|  |  |
| --- | --- |
| **Contact Name:** |  |

|  |  |
| --- | --- |
| **Title/Job Function:** |  |

|  |  |
| --- | --- |
| **Company:** |  |

|  |  |
| --- | --- |
| **Address:** |  |

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|  |  |
| --- | --- |
| **City/Town:** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Province/State:** |  | **Postal Code/Zip:** |  |

|  |  |
| --- | --- |
| **Telephone:** |  |

|  |  |
| --- | --- |
| **Fax:** |  |

|  |  |
| --- | --- |
| **Other:** |  |

|  |  |
| --- | --- |
| **E-mail:** |  |

|  |  |  |
| --- | --- | --- |
| How old is facility? |  | yrs |

|  |  |
| --- | --- |
| What is the nature of your business? |  |
|  | |

|  |  |
| --- | --- |
| Has there been a facility expansion(s) in the past 5 years? |  |

|  |  |
| --- | --- |
| Any facility expansion(s) planned in the next 2 years? |  |

|  |  |
| --- | --- |
| Can you supply accurate single-line diagram(s) of facility if required? |  |

|  |  |
| --- | --- |
| How many shifts do you usually run per day? |  |

|  |  |
| --- | --- |
| How many utility transformers does the facility have? |  |

|  |  |
| --- | --- |
| How many secondary transformers are inside the facility? |  |

|  |  |
| --- | --- |
| How many electrical meters does the facility have? |  |
|  |  |
| Is Transient Voltage Surge Suppression (TVSS) installed? |  |

# Service Entrance Data

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| kVA of transformer |  | | | kVA |
|  |  | | |  |
| Transformer Primary/Secondary Voltage |  | / |  | Vrms |
|  |
| Service Type:  Single Phase  Three-phase | | | |  |
| (3-wire) or (4-wire) |  | | |  |
| Transformer (%) Impedance\* |  | | | % |
|  |  | | |  |
| Transformer Short Circuit Capacity\* |  | | | KVA |
|  |  | | |  |
| \*Not required at this time. Enter only if known. |  | | |  |

# Switchgear

|  |  |  |  |
| --- | --- | --- | --- |
| Make: |  | Model: |  |
|  |  |  |  |
| Amperage: |  | Voltage |  |

# Existing Capacitor Banks

Are there any high-voltage capacitors on the primary side of the transformer?

|  |  |  |  |
| --- | --- | --- | --- |
| Yes | No |  |  |
|  |  |  |  |
| If “Yes” | Rated kVAR |  | KVAR |
|  |  |  |  |
| If “Yes” | Rated Voltage |  | Vrms |

Are there any low voltage capacitors on the secondary side of the transformer?

|  |  |  |  |
| --- | --- | --- | --- |
| Yes | No |  |  |
|  |  |  |  |
| If “Yes” | Rated kVAR |  | KVAR |

Contractor Info Package Required? (if yes start process as soon as possible) Yes No

# Power Usage

|  |  |
| --- | --- |
| Utility Provider: |  |

**Notes:**

|  |
| --- |
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|  |

## Types of Equipment in Facility

|  |  |  |
| --- | --- | --- |
| Computerized Equipment | Photocopiers | Fax machines |
| Laser Printers | Audio/Video Player/Recorders | UPS |
| Elevators | VFDs | Rectifiers or DC Chargers |
| Arc Furnaces | VSDs | Electroplating |
| Resistive Ovens | Cooling Towers | Arc Welders |
| Robotics | Tig or Mig Welders | Surge Suppression (TVSS) |
| Compressors |  |  |
|  |  |  |

## Typical Symptoms of Poor Power Quality

(Select all that apply)

|  |  |
| --- | --- |
| Telephone background noise or humming | Erratic non-explainable equipment failures |
| Drives tripping for no apparent reason | Hot Transformers |
| Warm or Hot circuit breaker panels | Over-heating electrical equipment |
| Over-heating motors | Excessive equipment failures |
| Power Supply failures | Transformer failures |
| Problems with computer controlled equipment | Motor failures |
| Flickering of fluorescent lighting | Failure of electronic equipment |
| Hot or warm metal enclosures, conduits or bus | Known Power Factor Problems |
| Known Power Quality Problems | Capacitor failures |

**Other Suspected Power Factor and Power Quality Problems**

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**Notes:**

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