

INSTALLATION TEST REPORT

(To be filled in by Licensed Electrical Contractor of Government of Gujarat)

Application For: New Load Alteration Reconnection Shifting

Purpose: Residential Commercial Industrial Others _____

Service No: _____ Date: _____

Consumer's Name: _____

Installation carried out at (Address): _____

Wiring Contractor's Name & Address: _____

Details of Installation (Please fill in all the details)

Single Phase

Three Phase

Insulation Test (MΩ)

Lighting Load					kW	Test	Lighting	Motive	Others
Common area Load					kW	Ph to E			
HVAC Load					kW	R-E			
Fire Fighting Load					kW	Y-E			
Pumping Load					kW	B-E			
Emergency Load					kW	Between			
Total					kW	R-Y			
	Make	Size	Sensitivity	Sr. No		Y-B			
ELCB						B-R			
Cap.						Neutral-E			

This installation as per details given is tested by me and is complete in all respects and conforms to the regulations, in the Measures relating to Safety and Electric Supply Regulations, 2010 and any amendments thereof notified by Central Electricity Authority.

Authorized Electrical Contractor's Stamp & Signature	Authorized Electrical Supervisor's Stamp & Signature
License No.:	License No.:

I/We have read the relevant regulations framed under Electricity Act 2003 and agree to abide by them.
I/We will own the responsibility of security and safety of Meter, cut out/MCB and Installation thereafter.

Consumer's Name and Signature: _____

INSTALLATION TEST REPORT



(To be filled in by Licensed Electrical Contractor of Government of Gujarat)

Details of Installation

Description	Phase wise details of connected Load									
	Single Phase		Three Phase							
			R Phase		Y Phase		B Phase			
	No.	Total Watt	No.	Total Watt	No.	Total Watt	No.	Total Watt	No.	Total Watt
Light										
Fan										
5 A Plug										
15 A Plug										
Geyser										
AC										
Total										
* Load should be equally divided on all phase										
<u>Motors</u>										
Make	No	BHP	Voltage	Ampere	Phase	Type	RPM			
1										
2										
3										
4										
5										
6										
7										
Total										

Authorized Electrical Contractor's Stamp & Signature	Authorized Electrical Supervisor's Stamp & Signature	Consumer's Name and Signature
--	--	-------------------------------