**Referenced to Water Corporation Standards: DS26-03, DS26-04, DS26-06, DS26-15, DS26- 20, and DS26-23.**

**Specifically refer to the ANNEXURE TO SPECIFICATION and TENDER TECHNICAL RESPONSE SCHEDULE for this Contract.**

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| --- | --- |
| **1. GENERAL DATA** | |
| PROJECT NAME: | PROJECT NO: |
| WC P.O. / CONTRACT NO: | LINE / ITEM NO: |

|  |  |
| --- | --- |
| **2. MOTOR DATA** | |
| TYPE: CAGE SLIP RING LV HV SUBMERSIBLE | |
| MAKE: | SERIAL NO: |
| FRAME: | MOUNTING: |
| ENCLOSURE PROTECTION: | INSULATION CLASS: |
| KW: | FREQUENCY: |
| STATOR VOLTAGE: | ROTOR VOLTAGE: |
| STATOR CURRENT: | ROTOR CURRENT: |
| SPEED: | COOLING: |
| STATOR CONNECTION: | DIRECTION OF ROTATION: |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **3. INSPECTION** | | **DONE**  **/YES** | **NO** | **N/A** | **COMMENTS/DETAILS** |
| 1 | Location of factory test and inspection. |  |  |  |  |
| 2 | Motor undamaged. |  |  |  |  |
| 3 | Motor in accordance with drawings and specification. |  |  |  |  |
| 4 | Visual inspection results provided & attached. |  |  |  |  |
| 5 | Air gap measurement results provided & attached. |  |  |  |  |
| 6 | Insulation resistance tests provided and attached. |  |  |  |  |
| 7 | Resistance measurements of windings and elements provided and attached. |  |  |  |  |
| 8 | Direction of rotation results provided & attached. |  |  |  |  |
| 9 | Checking of phase sequence results provided and checked. |  |  |  |  |
| 10 | Motor performance data provided & attached. |  |  |  |  |
| 11 | Motor Temperature rise data provided & attached. |  |  |  |  |
| 12 | High Voltage test data provided & attached. |  |  |  |  |
| 13 | No-load point test results provided & attached. |  |  |  |  |
| 14 | Vibration measurement results provided & attached. |  |  |  |  |
| 15 | Locked rotor test provided & attached. |  |  |  |  |
| 16 | Heat Exchanger pressure test results provided & attached. |  |  |  |  |
| 17 | Circulating Current countermeasures installed. |  |  |  |  |
| 18 | All Labelling is present and correct. |  |  |  |  |
| 19 | Location of delivery inspection. |  |  |  |  |

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| **4. REMARKS / REMEDIAL ACTIONS** |
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| **5. SIGNOFFS** | |  | | |
| NAME (PRINT) | COMPANY / ROLE | | SIGNATURE | DATE |
| NAME (PRINT) | COMPANY / ROLE | | SIGNATURE | DATE |
| NAME (PRINT) | COMPANY / ROLE | | SIGNATURE | DATE |