

Form to determine Field Installation Cables and Test Leads

Name: _____ Telephone: _____
 Company: _____ Date: _____
 E-Mail: _____ Signature: _____

Application:

Max. operating voltage (BIL): _____ (_____)

* Cable cross section: _____ Provided by Customer

Length of test and connection cable L [m]: _____ (0,1 m stepping)

** Dielectric routine test:

Side A

CONNEX:

Outdoor termination:

End-cap (not voltage proof):

Cable screen A

Length cable screen L_A [m]: _____

Side B

CONNEX:

Outdoor termination:

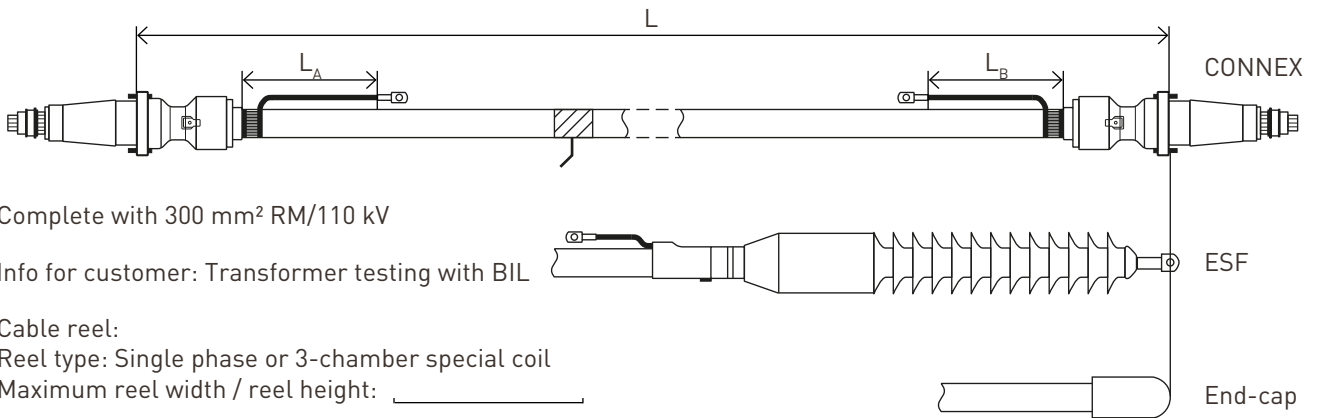
End-cap (not voltage proof):

Cable screen B

Length cable screen L_B [m]: _____

Side A

Side B



* Complete with 300 mm² RM/110 kV

** Info for customer: Transformer testing with BIL

Cable reel:

Reel type: Single phase or 3-chamber special coil

Maximum reel width / reel height: _____

Remark:

