

Generator Specifications:

Organization: _____

Address: _____

City/State/Zip: _____

Building Use: _____

Longitude: _____

Latitude: _____

Site POC: _____

Phone: _____

Cell Phone: _____

E-Mail: _____

Fax: _____

KW (assessed Gen. Size): _____

Generator Required Amperage: _____

Phase (assessed Gen. Phases): _____

Voltage (assessed Gen. Voltage): _____

Configuration: _____

Load Cable Size (MCM or #awg): _____

Load Cable Size Qty/UI (load cable length): _____

Load Cable Size Notes: _____

Ground Cable Size (MCM or #awg): _____

Ground Cable Size Qty/UI (ground wire length): _____

Ground Cable Size Notes: _____

Date and Time assessment is physically completed: _____

Remarks: