UMN-TC EQUIPMENT DATA FORM for

VARIABLE FREQUENCY DRIVE
(ONE FORM PER BUILDING)
Data entry completed __________
Data entry by _________________

Asset Number___________________ (To be provided by U of M Planner)

Above section for UMN-TC use only

All fields below this line to be completed by knowledgeable equipment supplier, contractor, architect, engineer or FM Maintenance staff and returned to the designated University of MN Project Manager or FM Planner

Architecture Eqpt No: ___________________________ (from construction drawings)

Manufacturer: Mfr Name ________________________________

Model No. ___________________ Serial No. ____________________

Location: Building ___________________________________________________________________

Floor __________________ Room # __________________

Equipment Serves (Identify building area(s) i.e. floors or rooms, and interlocked equipment)

_____________________________________________________________________________________

_____________________________________________________________________________________

Warranty Information:
Vendor __________________________________________________________________________________

Warranty Start Date _____________________ Warranty Expiration Date ___________________

Vendor Contact:
Name __________________________________________ Phone _________________________

EQUIPMENT SPECIFICATIONS

<table>
<thead>
<tr>
<th>LINE</th>
<th>SPEC_TYPE</th>
<th>DATA</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Unit HP &gt; 1HP</td>
<td>________________________________</td>
</tr>
<tr>
<td>2</td>
<td>Unit Voltage</td>
<td>________________________________</td>
</tr>
</tbody>
</table>

Form Completed by:
Name ________________________________ Phone _________________________

Company ____________________ Date ____________________________