

# COMPASS EQUIPMENT DATA FORM for

# TRANSFORMER

Data entry completed \_\_\_\_\_  
Data entry by \_\_\_\_\_

COMPASS Equipment Number \_\_\_\_\_ (To be provided by U of M Planner)

Above section for University of Minnesota 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

LINE	SPEC_TYPE	DATA
1	UNIT KVA/PHASE	_____
2	UNIT PRIMARY VOLTS	_____
3	UNIT SECONDARY VOLTS	_____
4	UNIT CLASS	_____
5	UNIT % IMPENDANCE	_____
6	UNIT BIL RATING (PRI)	_____
7	UNIT WINDING TYPE	_____
8	UNIT. STYLE NO	_____
9	UNIT COOLANT TYPE	_____
10	UNIT TAP CHANGER: Y/N	_____
11	UNIT WEIGHT	_____
12	UNIT PRIMARY CONNECTION	_____

- 13 UNIT SECONDARY CONNECT \_\_\_\_\_
- 14 UNIT TRANSFORMER TYPE \_\_\_\_\_
- 15 UNIT BIL RATING (SEC) \_\_\_\_\_
- 16 UNIT POLARITY/CLASS \_\_\_\_\_
- 17 UNIT GALLONS OF COOLANT \_\_\_\_\_
- 18 UNIT STYLE \_\_\_\_\_
- 19 UNIT CAT NO \_\_\_\_\_
- 20 UNIT FANS: YES OR NO \_\_\_\_\_
- 21 UNIT KVA, WITH FANS \_\_\_\_\_
- 22 UNIT FACTORY ORDER NO \_\_\_\_\_
- 23 UNIT INST. AND PARTS \_\_\_\_\_
- 24 UNIT INST. YR/DRAW NO \_\_\_\_\_
- 25 CHIL WATER RATE CALC: Y/N \_\_\_\_\_

**Form Completed by:**

Name \_\_\_\_\_ Phone \_\_\_\_\_

Company \_\_\_\_\_ Date \_\_\_\_\_