

ADELAIDE LABORATORY
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TRANSFORMER PROFILE FORM

Section 1: CUSTOMER PROFILE – (please complete all boxes)					
CUSTOMER NAME:		Test(s) Required: (please circle)			
			ADVANTAGE STANDARD	D DGA	
		FURANS PCB INTERPRETATION			
SITE:		OTHER(specify)			
		NORMAL 2-7 days results URGENT same day results (surcharge applies)			
		Contact Person:			
ORDER NUMBER:		Email Address:			
JOB NO.		Contact Phone:			
Section 2: TRANSFORMER DETAILS — (*minimum details required)					
Sampling Point (circle one)	* Main Tank Tap Changer/Switch Tank Other(specify)				
Insulation Oil Level	* high / normal / low (caution when sampling)				
Transformer Name*			*SERIAL NUMBER	*	
Equipment Number*			(critical information)		
Manufacturer*			Date Manufactured	*	
KVA Rating*			Volume (litres)	*	
Primary Volts*			Transformer Weight (kg)		
Secondary Volts*			Impedance %		
Transformer Class (ONAN/ONAF etc)			Winding Temp Indicator deg C		
Phase/Cycle (3/50 etc)			OIL SAMPLE TEMP deg C	*	
Radiators	Yes /	/ No	Nitrogen Blanket	Yes / No	
Fans	Yes /	/ No	Conservator	Yes / No	
Water Cooled	Yes /	/ No	LTC Compartment	Yes / No	
Oil Pump	Yes /	/ No	Free Breather	Yes / No	
Leaks	Yes /	/ No	Sealed Unit	Yes / No	
Paint Condition good / fair / bad					
Inspection/Other Comments:					
Sampled By:			Sample Date:		
- 10 parton diato.			ourier Name/Con #:		
FAX TO TRANSCARE PRIOR TO DISPATCHING SAMPLE – unless arranged otherwise					