

DEPARTMENT OF FACILITY & INFRASTRUCTURE



ELECTRICAL INTAKE/SITE WITNESS FORM – MEDIUM VOLTAGE CABLE (5kV/15kV)



Project Name:	Inspection Date:		
Project Number:			
Contractor Company:			
MANHOLE#/SECTION:	START POINT:	FINISH POINT:	CABLE LENGTH (FT):

SR. NO	DESCRIPTION	POS AVM* Witness/Inspection Name:		POS PROJECT ELECTRICAL INSPECTOR Witness/Inspection Name:		POS RESIDENT ENGINEER Witness/Inspection Name:		POS F&I ELECTRICAL* Witness/Inspection Name:		NAME & INITIAL OF CONTRACTOR PERFORMING MV CABLE WORK AT SITE INCLUDING LIC#	COMMENTS
1	Die Crimp to Connector Inspection	Inspected & Verified	<input type="checkbox"/>	Initials:							
2	Megger Readings	Inspected & Verified	<input type="checkbox"/>	Initials:							
3	Dynamometer Red Line before Reset	Inspected & Verified	<input type="checkbox"/>	Initials:							
4	MV Cable Voltage rating & Jacket Type	5kV <input type="checkbox"/> 15kV <input type="checkbox"/> PVC Jacketed <input type="checkbox"/> CPE Jacketed <input type="checkbox"/> End Seals <input type="checkbox"/> Pulling Eye (15kV >250Ft/Phase) <input type="checkbox"/> Manufacturing Date (<12 month before installation) <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	5kV <input type="checkbox"/> 15kV <input type="checkbox"/> PVC Jacketed <input type="checkbox"/> CPE Jacketed <input type="checkbox"/> End Seals <input type="checkbox"/> Pulling Eye (15kV >250Ft/Phase) <input type="checkbox"/> Manufacturing Date (<12 month before installation) <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	5kV <input type="checkbox"/> 15kV <input type="checkbox"/> PVC Jacketed <input type="checkbox"/> CPE Jacketed <input type="checkbox"/> End Seals <input type="checkbox"/> Pulling Eye (15kV >250Ft/Phase) <input type="checkbox"/> Manufacturing Date (<12 month before installation) <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	5kV <input type="checkbox"/> 15kV <input type="checkbox"/> PVC Jacketed <input type="checkbox"/> CPE Jacketed <input type="checkbox"/> End Seals <input type="checkbox"/> Pulling Eye (15kV >250Ft/Phase) <input type="checkbox"/> Manufacturing Date (<12 month before installation) <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Initials:	
5	Schedule/Plan	Cable Pull Cal. <input type="checkbox"/> Cable Pull Schedule <input type="checkbox"/> Switchover and Outage Plan <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Cable Pull Cal. <input type="checkbox"/> Cable Pull Schedule <input type="checkbox"/> Switchover and Outage Plan <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Cable Pull Cal. <input type="checkbox"/> Cable Pull Schedule <input type="checkbox"/> Switchover and Outage Plan <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Cable Pull Cal. <input type="checkbox"/> Cable Pull Schedule <input type="checkbox"/> Switchover and Outage Plan <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Initials:	
6	Conduit Cleaning Prior to Cable Installation	Wire Brush Mandrel <input type="checkbox"/> Then, a rubber duct swab <input type="checkbox"/> Separated by 48 to 72 Inch on pull rope <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Wire Brush Mandrel <input type="checkbox"/> Then a rubber duct swab <input type="checkbox"/> Separated by 48 to 72 Inch on pull rope <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Wire Brush Mandrel <input type="checkbox"/> Then a rubber duct swab <input type="checkbox"/> Separated by 48 to 72 Inch on pull rope <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Wire Brush Mandrel <input type="checkbox"/> Then a rubber duct swab <input type="checkbox"/> Separated by 48 to 72 Inch on pull rope <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Initials:	
7	MV Conductor Termination	Indoor <input type="checkbox"/> Outdoor <input type="checkbox"/> Comp. type connector <input type="checkbox"/> Shield ground strap <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Indoor <input type="checkbox"/> Outdoor <input type="checkbox"/> Comp. type connector <input type="checkbox"/> Shield ground strap <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Indoor <input type="checkbox"/> Outdoor <input type="checkbox"/> Comp. type connector <input type="checkbox"/> Shield ground strap <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Indoor <input type="checkbox"/> Outdoor <input type="checkbox"/> Comp. type connector <input type="checkbox"/> Shield ground strap <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		

DEPARTMENT OF FACILITY & INFRASTRUCTURE



ELECTRICAL INTAKE/SITE WITNESS FORM – MEDIUM VOLTAGE CABLE (5kv/15kv)



| | | Arc Proofing Tape
<input type="checkbox"/> | Initials: | |
|----|--|--|--|--|--|--|--|-----------|--|
| | | Fireproofing Wrap
<input type="checkbox"/> | | |
| | | First 05 Terminations
<input type="checkbox"/> | | |
| | | Non-Metallic Tie Wraps for cable support
<input type="checkbox"/> | | |
| | | Cable tags
<input type="checkbox"/> | | |
| | | Feeder/Circuit Tag
<input type="checkbox"/> | | |
| | | Tap/Load Tag
<input type="checkbox"/> | | |
| | | Phase Tape
<input type="checkbox"/> | | |
| | | Conductor Color coding
<input type="checkbox"/> | | |
| | | Cable loop within Manhole
<input type="checkbox"/> | | |
| 8 | Testing | Insulation Resistance Test (Cable on Reel)
<input type="checkbox"/> | Initials: | |
| 9 | Verify that the proper connector has been provided for the operating voltage and to accommodate the cable sizes and types used. | Compliant
<input type="checkbox"/>
Non-Compliant
<input type="checkbox"/> | Initials: | |
| 10 | Verify the insulation has been stripped back to the proper specified dimension for each layer and type of insulation in preparation for connector installation, in accordance with manufacturer's instructions. | Compliant
<input type="checkbox"/>
Non-Compliant
<input type="checkbox"/> | Initials: | |
| 11 | Verify that the stripped cable has been properly cleaned in preparation for connector installation. Verify that the semiconductor material residue has been cleaned off the insulation using an axial wiping motion to eliminate tracking. | Compliant
<input type="checkbox"/>
Non-Compliant
<input type="checkbox"/> | Initials: | |
| 12 | Verify that the compression lug or | Compliant
<input type="checkbox"/>
Non-Compliant
<input type="checkbox"/> | Initials: | |

DEPARTMENT OF FACILITY & INFRASTRUCTURE



ELECTRICAL INTAKE/SITE WITNESS FORM – MEDIUM VOLTAGE CABLE (5kV/15kV)



	connector supplied with the connector kit has been properly crimped per the manufacturer's written instructions									
13	Verify that the connector is torqued to proper values per the manufacturer's published torque values.	Compliant Non-Compliant	<input type="checkbox"/> <input type="checkbox"/>	Initials:						

ADDITIONAL COMMENTS:

ACCEPTANCE AND APPROVAL:

APPROVED	YES <input type="checkbox"/>	NO <input type="checkbox"/>	APPROVED	YES <input type="checkbox"/>	NO <input type="checkbox"/>	APPROVED	YES <input type="checkbox"/>	NO <input type="checkbox"/>	APPROVED	YES <input type="checkbox"/>	NO <input type="checkbox"/>
NAME:			NAME:			NAME:			NAME:		
SIGNATURE:			SIGNATURE:			SIGNATURE:			SIGNATURE:		
DATE:			DATE:			DATE:			DATE:		
POS ELECTRICAL INSPECTOR			POS RESIDENT ENGINEER			POS AVM DEPTT.			POS F&I ELECTRICAL DEPTT.		

Note: AVM Deptt. and F&I Deptt. require advance notice (at least 05 day working) for any site walk or inspection. Coordinate with Resident Engineer and Electrical Inspector for Scheduling.

**** – Either of Deptt. can inspect and provide their feedback/approval depending upon availability on Inspection Date.**