

Order:

Place _____ Installation / machine / inventory no.: _____ Equipment designation / No.: _____

Test device used (according to DIN VDE 0413):

1. Device type / designation: _____ Inventory number: _____ Calibrated until: _____

- ☐ The adjustment values of the overload protection element correspond to the equipment data.
(Note motor nominal current for motor circuit breaker / bimetallic (thermal) relay / thermistor motor protection / frequency inverter!)
- ☐ The impedance of the protective conductor has been proven.
Measurement value: _____ Ohm
- ☐ The required IP protection type was maintained.
- ☐ The equipment is suitable for the operating conditions. (Attention: e.g. special requirements must be followed for external areas!)

Optional:

- ☐ The impedance of the fault loops of the supply line was proven by measurement methods / determined numerically.
Measurement value: Z_s : _____ Ω I_k : _____ A
Calculated value: Z_s : _____ Ω I_k : _____ A
- ☐ The nominal current is in order.
Measurement values: L1: _____ A L2: _____ A L3: _____ A

Comment:**Signature:**

Place _____ Date _____ Signature of inspector _____