

Industrial EKG RFQ and Configuration Worksheet

Complete and email this form to Sales@industrialekg.com



Date of Request _____ Your reference# _____ IEKG Reference # _____
 Proposal Date Requested _____ System Delivery Date Requested _____
 Worksheet Prepared By _____ of (company) _____
 Tel _____ email _____ GMT +/- _____ Hrs

Customer Name _____ **Location** _____

| <u>Induction Motor Nameplate Data</u> | <u>Notes</u> |
|--|--------------|
| Rated Volts _____ Service Factor _____ | |
| Rated Amps _____ Frame _____ | |
| Rated Speed _____ RPM Full load efficiency _____ | |
| Frequency _____ Hz NEMA design letter _____ | |
| Multispeed? ___ Yes ___ No Rated HP or KW _____ | |
| Manufacturer _____ Model No _____ | |

| <u>Motor Electrical Drive Type</u> | <u>Driven Equipment</u> |
|---|--|
| Direct Line Connection _____ Inverter _____ | Description _____ |
| If Inverter, _____ | Duty cycle: On ___ %, Off ___ % |
| Manufacturer + Model _____ | Typical load fluctuation: + ___ %, - ___ % |
| Soft Starter? ___ Yes ___ No | Drive type: ___ Direct ___ Belt ___ Geared |
| | Other: _____ |

| <u>Current Transformers</u> | <u>Notes</u> |
|-------------------------------------|---|
| Using customer's CTs? ___ Yes | ___ No, IEKG to Supply CTs |
| Are customer CTs Class 1 (1%)? ___ | Wire OD _____ mm |
| Primary:Secondary ratio _____:_____ | Mounting: Base ___ Side ___ |
| | Please attach picture of inside of MCC plus sketch with inside dimensions |

| <u>Potential (Voltage) Transformers</u> | <u>Notes</u> |
|---|--|
| Will MCM be direct line connected < 500V? _____ | If Yes, skip the remainder of this section. |
| Using customer's PTs? ___ Yes | ___ No, IEKG to supply PTs |
| Fuses Required from IEKG? ___ Yes ___ No | Temperature range in cabinet _____ - _____ C |
| | Please attach picture of inside of MCC plus sketch of dimensions |

Communication

None _____ Serial _____ Wired Ethernet to Switch or Router _____ Wired Ethernet direct to PC _____

Will this system be added to an existing IEKG or Artesis software installation? ___ Yes ___ No

Other (describe in detail) _____

Services

Who is doing the system installation? _____

Who is doing the system training? _____

Additional Comments / Requests