

TEST REPORT FOR CROSS

| | |
|-----------------------|-----------------------|
| CUSTOMER | ELETTRODINAMICA SPA |
| EQUIPMENT TYPE | CROSS 4P 400A CABINET |
| MANUFACTURER CODE | CH56370ED000AA0 |
| MANUFACTURER ORDER | W085270 - W085745 |
| SERIAL NUMBER | B291826 |
| ORDER ACKNOWLEDGEMENT | 0130126 |

SYSTEM PARAMETERS

UNIT SIZE: 250 A ☐ 400 A ☒ 600 A ☐ 800 A ☐ 1250 A ☐ A ☐

INPUT S1

NOMINAL VOLTAGE: 380 V ☐ 400 V ☒ 415 V ☐ V ☐
FREQUENCY: 50 Hz ☒ 60 Hz ☐

INPUT S2

NOMINAL VOLTAGE: 380 V ☐ 400 V ☒ 415 V ☐ V ☐
FREQUENCY: 50 Hz ☒ 60 Hz ☐

OUPTPUT

NOMINAL VOLTAGE: 380 V ☐ 400 V ☒ 415 V ☐ V ☐
FREQUENCY: 50 Hz ☒ 60 Hz ☐

OPTIONS INSTALLED:

INPUT/OUTPUT BOARD ☐
PORTABLE DISPLAY ☐
KIT WITHOUT NEUTRAL ☐
MULTICOM ☐
LIFE 2000 ☐
JBUS ADAPTER ☐
SPECIAL CABLE ☐

CHLORIDE POWER PROTECTION

UPS REVISION:

| | | | | | | | | | | | | | |
|---|--------------------------|---|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|
| 1 | <input type="checkbox"/> | 2 | <input type="checkbox"/> | 3 | <input type="checkbox"/> | 4 | <input type="checkbox"/> | 5 | <input type="checkbox"/> | 6 | <input type="checkbox"/> | 7 | <input type="checkbox"/> |
| 8 | <input type="checkbox"/> | 9 | <input type="checkbox"/> | 10 | <input type="checkbox"/> | 11 | <input type="checkbox"/> | 12 | <input type="checkbox"/> | 13 | <input type="checkbox"/> | 14 | <input type="checkbox"/> |

SIB LEVEL:

| | | | | | | | | | | | | | |
|----|-------------------------------------|----|-------------------------------------|----|-------------------------------------|----|-------------------------------------|----|-------------------------------------|----|-------------------------------------|----|-------------------------------------|
| A | <input type="checkbox"/> | B | <input type="checkbox"/> | C | <input type="checkbox"/> | D | <input type="checkbox"/> | E | <input type="checkbox"/> | F | <input type="checkbox"/> | G | <input checked="" type="checkbox"/> |
| H | <input checked="" type="checkbox"/> | I | <input type="checkbox"/> | L | <input checked="" type="checkbox"/> | M | <input type="checkbox"/> | N | <input type="checkbox"/> | O | <input checked="" type="checkbox"/> | P | <input checked="" type="checkbox"/> |
| Q | <input type="checkbox"/> | R | <input checked="" type="checkbox"/> | S | <input type="checkbox"/> | T | <input checked="" type="checkbox"/> | U | <input checked="" type="checkbox"/> | V | <input type="checkbox"/> | W | <input type="checkbox"/> |
| X | <input type="checkbox"/> | J | <input type="checkbox"/> | Y | <input type="checkbox"/> | Z | <input type="checkbox"/> | AA | <input type="checkbox"/> | AB | <input type="checkbox"/> | AC | <input type="checkbox"/> |
| AD | <input type="checkbox"/> | AE | <input type="checkbox"/> | AF | <input type="checkbox"/> | AG | <input type="checkbox"/> | AH | <input type="checkbox"/> | AI | <input type="checkbox"/> | AL | <input type="checkbox"/> |
| AM | <input type="checkbox"/> | AN | <input type="checkbox"/> | AO | <input type="checkbox"/> | AP | <input type="checkbox"/> | AQ | <input type="checkbox"/> | AR | <input type="checkbox"/> | AS | <input type="checkbox"/> |
| AT | <input type="checkbox"/> | AU | <input type="checkbox"/> | AV | <input type="checkbox"/> | AW | <input type="checkbox"/> | AX | <input type="checkbox"/> | AJ | <input type="checkbox"/> | AY | <input type="checkbox"/> |
| AZ | <input type="checkbox"/> | BA | <input type="checkbox"/> | BB | <input type="checkbox"/> | BC | <input type="checkbox"/> | BD | <input type="checkbox"/> | BE | <input type="checkbox"/> | BF | <input type="checkbox"/> |
| BG | <input type="checkbox"/> | BH | <input type="checkbox"/> | BI | <input type="checkbox"/> | BL | <input type="checkbox"/> | BM | <input type="checkbox"/> | BN | <input type="checkbox"/> | BO | <input type="checkbox"/> |
| BP | <input type="checkbox"/> | BQ | <input type="checkbox"/> | BR | <input type="checkbox"/> | BS | <input type="checkbox"/> | BT | <input type="checkbox"/> | BU | <input type="checkbox"/> | BV | <input type="checkbox"/> |
| BW | <input type="checkbox"/> | BX | <input type="checkbox"/> | BJ | <input type="checkbox"/> | BY | <input type="checkbox"/> | BZ | <input type="checkbox"/> | CA | <input type="checkbox"/> | CB | <input type="checkbox"/> |
| CC | <input type="checkbox"/> | CD | <input type="checkbox"/> | CE | <input type="checkbox"/> | CF | <input type="checkbox"/> | CG | <input type="checkbox"/> | CH | <input type="checkbox"/> | CI | <input type="checkbox"/> |
| CL | <input type="checkbox"/> | CM | <input type="checkbox"/> | CN | <input type="checkbox"/> | CO | <input type="checkbox"/> | CP | <input type="checkbox"/> | CQ | <input type="checkbox"/> | CR | <input type="checkbox"/> |
| CS | <input type="checkbox"/> | CT | <input type="checkbox"/> | CU | <input type="checkbox"/> | CV | <input type="checkbox"/> | CW | <input type="checkbox"/> | CX | <input type="checkbox"/> | CJ | <input type="checkbox"/> |
| CY | <input type="checkbox"/> | CZ | <input type="checkbox"/> | | | | | | | | | | |

CRA:

SERIAL NUMBERS OF INSTRUMENTS USED IN TESTING

| | TYPE | SERIAL No. |
|-------------------|----------------|------------|
| - MULTIMETER | FLUKE 87-5 | 07940 |
| - OSCILLOSCOPE | LECROY 9344C | 5932 |
| - AMP. TRANSDUCER | FLUKE 80i-500s | 05214 |
| - WATTMETER | | |
| - AUTOMATIC TEST | | |

EPROMS REVISION
TESTED BY

AMATO

CODE 10H01045

REV. 3.00
DATE 17/11/2009

CHLORIDE

POWER PROTECTION

RELEVANT TEST PROCEDURE:

ADDED DOCUMENTS (for special application):

NOTE: VOLTAGE RMS MAX CRITICAL THRESHOLD: 15%

-VOLTAGE RMS MIN CRITICAL THRESHOLD: 15%

-FREQUENCY MAX THRESHOLD: 3,5%

-FREQUENCY MIN THRESHOLD: 3,5%

-PHASE ERROR THRESHOLD: +/-10°

-INSTANT VOLTAGE MIN THRESHOLD: 60%

CHLORIDE POWER PROTECTION

ROUTINE TEST

| TESTS | RESULT | |
|---|-------------------------------------|--------------------------|
| | POS. | NEG. |
| 1) DIELECTRIC STRENGTH TEST | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2) SETTINGS | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 3) OPERATION STATIC SWITCHES (S1 E S2) AND FANS | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 4) CURRENT AND VOLTAGE MEASUREMENT CHECK | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 5) DIGITAL I/O CHECKS – INCLUDING DISPLAY | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 6) TERMINAL CONTACTS AND RELEASE CONTACTS | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 7) CALIBRATION OF ALL MEASUREMENTS (VOLTAGE, CURRENT, ETC...) | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8) NORMAL OPERATION: | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8.1 COMMUTATION FROM S1 - S2 FROM CONTROL PANEL – PREFERRED SOURCE = S1 | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8.2 COMMUTATION FROM S2 - S1 FROM CONTROL PANEL – PREFERRED SOURCE = S1 | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8.3 COMMUTATION FROM S2 - S1 FROM CONTROL PANEL – PREFERRED SOURCE = S2 | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8.4 COMMUTATION FROM S1 - S2 FROM CONTROL PANEL – PREFERRED SOURCE = S2 | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8.5 COMM. FROM S1 - S2 DUE TO FAULTY SOURCE - PREFERRED SOURCE = S1 | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8.6 COMM. FROM S2 - S1 DUE TO FAULTY SOURCE - PREFERRED SOURCE = S2 | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 9) BACK-FEED DETECTOR CIRCUIT TEST ON ALL PHASES | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 10) SHORT CIRCUIT DETECTOR TEST ON ALL PHASES | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 11) EPO TEST | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 12) SCR INHIBITION TEST ON ALL PHASES | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 13) BURN IN TEST | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 14) OPTION AND OTHER: | | |
| | <input type="checkbox"/> | <input type="checkbox"/> |
| | <input type="checkbox"/> | <input type="checkbox"/> |
| | <input type="checkbox"/> | <input type="checkbox"/> |
| | <input type="checkbox"/> | <input type="checkbox"/> |
| | <input type="checkbox"/> | <input type="checkbox"/> |

TESTED BY

AMATO

DATE 17/11/2009