**Sample Data Sheet**

Evaluation Type (select one):

|  |  |
| --- | --- |
| **Voltage Regulator Diagnostic Evaluation**  | [ ]  |
| **ESP\* Transformer Rectifier Diagnostic Evaluation**  | [ ]  |

\* Electrostatic Precipitator

|  |  |
| --- | --- |
| Oil Tests & Diagnostic Package includes: | DGA (ASTM D3612), Moisture (ASTM D1533), IFT (ASTM D971), Color (ASTM D1500), Visual (ASTM D1524), Acid Number (ASTM D974) Dielectric Breakdown (ASTM D1816), and diagnostic analysis of results. |

 Company Information:

|  |  |  |  |
| --- | --- | --- | --- |
| Company Name & Billing Address | **P.O. Number:** |       | Comments |
|       | **Job Number:** |       |       |
|       | **Contact Person:** |       |  |
|       | **Send Reports To:** |       |  |
|       |  |       |  |
|       |  |       |  |

Oil Sample Information: (maximum of 3 oil samples per data sheet)

|  |  |  |  |
| --- | --- | --- | --- |
| Date Oil Sampled |       |       |       |
| Sampling Technician |       |       |       |
| **Equipment Location** |       |       |       |
| Phase / Bank No. |       /       |       /       |       /       |
| **Equipment Name/ID** |       |       |       |
| **Other Name/ID** |       |       |       |
| **DGA Syringe No.** |       |       |       |
| **Oil Quality Bottle No.** |       |       |       |
| **Serial No.** |       |       |       |
| **Manufacturer** |       |       |       |
| **Year Manufactured** |       |       |       |
| **kV High** |       |       |       |
| **kV Low** |       |       |       |
| **KVA** |       |       |       |
| **Breathing Configuration** | [ ]  Sealed[ ]  Vented | [ ]  Sealed[ ]  Vented | [ ]  Sealed[ ]  Vented |
| Oil Type | [ ] Mineral /[ ] Silicone /[ ] Other | [ ] Mineral /[ ] Silicone /[ ] Other | [ ] Mineral /[ ] Silicone /[ ] Other |
| Oil Volume |       [ ] Gallons [ ] Liters |       [ ] Gallons [ ] Liters |       [ ] Gallons [ ] Liters |
| **Oil Temperature (oC)** |       |       |       |
| **Oil PCB Content (ppm)** |       |       |       |
| *For Laboratory Use Only* |  |  |  |

**Return containers and oil samples to:**

AVO Diagnostic Services.

110 7304 30th Street S.E., Calgary AB, Canada T2C 1W2

T +1 403 203 0550, F +1 403 203 0549, www.avodiagnostics.com