

CarbonTRACK Scoping Form



CUSTOMER INFORMATION

CUST REF		
FULL NAME		
ADDRESS		
SUBURB		
POSTCODE		STATE:
MOBILE NUMBER		
EMAIL		

INSTALL DATE	
START TIME	
FINISH TIME	
ELEC LICENCE NO	

SITE INFORMATION

ELECTRICITY CONSUMPTION	SINGLE PHASE / TWO PHASE / THREE PHASE	
CURRENT RATING (AMPS) OF THE MAINS BREAKER	_____ Amps	
ARE THERE ANY POWER SUB-BOARDS?	YES / NO Location: _____	
LOCATION OF SWITCHBOARD		
ANY ACCESS ISSUES?		CUSTOMER HOME FOR INSTALL: YES / NO
LOCATION OF CT UNIT		
ELECTRICAL NOISE	WILL THE UNIT BE INSTALLED IN CLOSE PROXIMITY TO OTHER ELECTRICAL EQUIPMENT? YES / NO (CAN CAUSE COMMUNICATIONS ISSUES)	
PV SOLAR	YES / NO SYSTEM SIZE:	
INVERTER TYPE	SINGLE PHASE / THREE PHASE / MICRO-INVERTERS / HYBRID INVERTER	
BATTERY	YES / NO	
CIRCUIT SWITCHING	YES / NO	
PHOTO'S PROVIDED BY CUSTOMER	OPEN SWITCHBOARD: YES / NO	
	SURROUNDS OF SWITCHBOARD: YES / NO	
	PHOTO OF MAIN CIRCUIT BREAKER: YES / NO	
	SUB-BOARD: YES / NO	

UNIT INSTALLATION INFORMATION

DESCRIPTION OF WORK:

CIRCUITS TO BE SWITCHED

RELAY NUMBER	CIRCUIT DESCRIPTION	TESTED
1		YES / NO
2		YES / NO
3		YES / NO

BYPASS SWITCH INSTALLED: YES NO

INSTALLATION

NUMBER OF UNITS:

DIN(S): _____ / _____

SIM(S): _____ / _____

UNITS COMMISSIONED: YES **IF NOT, CALL TECH SUPPORT (1300 288 648 EXT 3)**

SATELLITE UNITS WORKING CORRECTLY: YES NO

SWITCHING WORKING CORRECTLY: DEVICE 1 DEVICE 2 DEVICE 3

CLAMP SIZE: _____

PHASE 1 READING: _____ PHASE 2 READING: _____ PHASE 3 READING: _____

SOLAR READING: _____

CUSTOMER AUTHORISES LOCATION AND POSITION OF CT UNIT - CUSTOMER INITIAL: _____

POST INSTALLATION PHOTOS TO BE TAKEN:

- SURROUNDS OF SWITCHBOARD WHERE CT UNIT IS TO BE INSTALLED
- PHOTO OF INTERNAL OF CT UNIT ONCE INSTALLED
- SWITCHBOARD INTERIOR ONCE INSTALLED (OR SUB-BOARD AS RELEVANT)
- CLOSE UP OF CLAMPS INSTALLED
- SOLAR INVERTER ONCE INSTALLED (IF PV SOLAR SYSTEM ON SITE)
- CERTIFICATE OF ELECTRICAL SAFETY

This installation has been completed according to required safety guidelines. The site has cleaned and rubbish removed. The customer is satisfied with the installation. I have sent photos, a copy of Take 5 or completed SWMS and a copy of the Certificate of Electrical Safety to operations@carbontrack.com.au.

INSTALLER SIGNATURE: _____ DATE: _____

CUSTOMER NAME: _____ CUSTOMER SIGNATURE: _____