

INSPECTIONS DIVISION
CITY OF DECATUR

Date: _____ Permit#: _____

Contractor Name: _____ Phone: _____

Address: _____ City/State/Zip: _____

The following information is requested to determine that the electrical equipment to be installed at:

Owner/Occupant: _____

Address: _____ Decatur, IL

is in compliance with the National Electrical Code as it relates to available short-circuit currents and interrupting ratings.

This form is to be completed and returned to the Department of Electrical Inspections for approval PRIOR to installation.

THE FOLLOWING INFORMATION IS TO BE SUPPLIED BY THE ELECTRICAL CONTRACTOR OR OTHER RESPONSIBLE PARTY:

TRANSFORMER KVA _____ IMPEDANCE _____ % SECONDARY VOLT. _____

PHASE _____ 3 OR 4 WIRE _____ LENGTH OF SERVICE CONDUCTORS _____

SIZE AND NUMBER OF SERVICE CONDUCTORS PER PHASE _____

TYPE OF CONDUCTORS: COPPER ALUMINUM

CONDUIT SIZE _____ STEEL NON-MAGNETIC

TYPE, SIZE, AND INTERRUPTING RATING OF OVERCURRENT DEVICES IN SERVICE DISCONNECT (MAIN DISTRIBUTION PANEL):

SIZE OF GROUNDING ELECTRODE CONDUCTOR _____

BRACING OF SERVICE EQUIPMENT _____

FAULT CURRENT CALCULATIONS

OVERCURRENT DEVICE

ITEM	LOC. OF SHORT CIRCUIT CURRENT	SHORT CIRCUIT CURRENT	AMPERE RATING	INTERRUPTING RATING	APPARENT RMS LET-THRU CURRENT	PEAK LET-THRU
1	AT TRANSFORMER SECONDARY TERMINALS (INFINITE PRIMARY)					
2	ON LINE SIDE OF MAIN SERVICE EQUIPMENT					
3	LET-THRU CURRENT ON LOAD SIDE OF MAIN OVERCURRENT DEVICE					
4	AT PANEL _____					
5	AT PANEL _____					
6	AT PANEL _____					
7	AT PANEL _____					
8	AT PANEL _____					
9	AT PANEL _____					
10	AT PANEL _____					
11	AT PANEL _____					
12	AT PANEL _____					

Use back of form or attach separate sheet for data on additional panels.

Where current limiting devices are used, show mfg. name, part number, and let-thru curves.

Attach separate sheet to show one-line diagram of service, feeders, and all related panels.

Attach let-thru curves if current-limiting devices are used.

All current values in RMS values line-to-line unless otherwise noted.

The undersigned accepts full responsibility for the values given herein.

Signed: _____ Date: _____

Daytime Phone: _____