

ASSET INSPECTION REQUEST FORM

Asset / Building Name:	_____	Description of the asset:	_____
Location:	_____		_____
Requested by:	_____		_____
	(NAME & COMPANY)		
Request Date:	_____		_____
Last Recorded Inspection Date:	_____		_____

VISUAL INSPECTION

- | | |
|--|--------------------------|
| Switchboard Inspection | <input type="checkbox"/> |
| Lightning Protection System Inspection | <input type="checkbox"/> |
| Main Electrical Earth Inspection | <input type="checkbox"/> |
| Grounding and Bonding Condition | <input type="checkbox"/> |
| Cable and Cable Management Condition | <input type="checkbox"/> |

DELIVERABLES

- | | |
|-----------------------|--------------------------|
| Test Data | <input type="checkbox"/> |
| Recommendation Report | <input type="checkbox"/> |

ELECTRICAL TESTING / INSPECTION

- | | |
|--|--------------------------|
| Lightning Protection System Electrical Testing | <input type="checkbox"/> |
| Main Electrical Earth Testing | <input type="checkbox"/> |
| Transformer Earthing Testing | <input type="checkbox"/> |
| Switchboard Compliance Checks | <input type="checkbox"/> |
| Power Monitoring for Signs of Overvoltage or Transients Presence | <input type="checkbox"/> |
| Thermographic Imaging | <input type="checkbox"/> |
| Power Quality Analysis (Harmonics, Power Factor and Phase Balancing with Report) | <input type="checkbox"/> |
| Maximum Demand Verification | <input type="checkbox"/> |
| Surge Protection Analysis | <input type="checkbox"/> |
| Protection Testing (AC/DC Residual Protection) | <input type="checkbox"/> |
| EV Charger Testing | <input type="checkbox"/> |
| UPS and Battery Testing | <input type="checkbox"/> |
| Generator Condition Inspection | <input type="checkbox"/> |
| Power Factor Correction Unit Inspection | <input type="checkbox"/> |
| Harmonic Filter Unit Inspection | <input type="checkbox"/> |

NAME & DESIGNATION

SIGNED

DATE

Once complete email this form to service@lpinz.co.nz