

# **APPENDIX 'F'**

## **NETWORK COMMISSIONING REPORT**



Network number
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WORK CATEGORIES	APPLICABLE		STATE ALL DEFICIENCIES OR DISCREPANCIES	CORRECTIONS COMPLETED	
	Yes	No		Department	yyyy mm dd
Poles					
Primary System					
Secondary System					
Transformer					
Equipment Data					
Street Lights					
Connect/ Disconnects					
Regulator					
Capacitors					
URD Secondary					
URD Primary					
Terminals					
Materials Location/Condition					
Site Condition					
Sub Transmission System					
Transmission System					
Station System					
GPS Locations Synchronized					

<b>SIGN OFFS (Network Authenticated Signatures):</b>			
Deficiencies identified by (Customer Service Center Representative)	yyyy mm dd	Corrections completed by	yyyy mm dd
<b>WORK COMPLETION</b>			
I hereby accept the Construction and Workmanship of this Order and Consider it to be Complete.			
Accepted as complete by (Customer Service Center Representative)	yyyy mm dd	Accepted as complete by (Construction Manager)	yyyy mm dd