

APPENDIX 'F'

NETWORK COMMISSIONING REPORT

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|----------------|
| 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 | | | | | |

| | | | |
|--|------------|--|------------|
| SIGN OFFS (Network Authenticated Signatures): | | | |
| Deficiencies identified by (Customer Service Center Representative) | yyyy mm dd | Corrections completed by | yyyy mm dd |
| WORK COMPLETION | | | |
| 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 |