

**Prefab Dept. Use Only**

Materials Ordered:

By:

Date:

Prefab Transformer Order Form

QC Document Done:

QC Document Turned In:

DATE:
DATE REQ'D ON PROJECT:
PROJECT MANAGER:**JOB NAME:**
JOB NUMBER:
FOREMAN:**THIS SIDE OF TRANSFORMER:****PRIMARY** **SECONDARY****PARALLEL CONDUCTORS:****YES** **NO****RACEWAY TYPE:****(B)****TRANSFORMER LABEL / TAG:****RACEWAY SIZE:****RACEWAY LENGTH:****RACEWAY CONNECTER TYPE (A):****RACEWAY CONNECTER TYPE (B):****WIRE TYPE:****WIRE LENGTH OUTSIDE OF TRANSFORMER:****MOUNTING TYPE:****PHASE CONDUCTOR SIZE:****HANGER DIMENSIONS:****NUETRAL CONDUCTOR SIZE:****HANGER MATERIALS:****MAIN BONDING JUMPER SIZE / WIRE TYPE:****GROUND CONDUCTOR SIZE:****THIS SIDE OF TRANSFORMER:****PRIMARY** **SECONDARY****PARALLEL CONDUCTORS:****YES** **NO****RACEWAY TYPE:****(B)****RACEWAY SIZE:****(B)****RACEWAY LENGTH:****(A)****RACEWAY CONNECTER TYPE (A):****RACEWAY CONNECTER TYPE (B):****WIRE TYPE:****(A)****WIRE LENGTH OUTSIDE OF TRANSFORMER:****PHASE CONDUCTOR SIZE:****NUETRAL CONDUCTOR SIZE:****MAIN BONDING JUMPER SIZE / WIRE TYPE:****GROUND CONDUCTOR SIZE:**