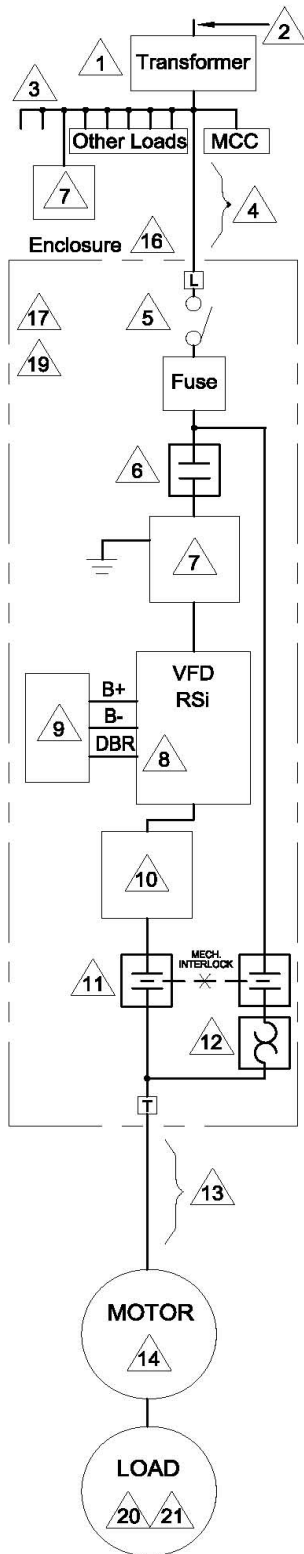


# VFD Pre-Sale Check Sheet



Note: Items marked with \* are mandatory fields.

<b>Commercial Information</b>	*Company Name _____ Address _____
	*Contact Person _____
	*Email _____ *Phone Number _____



**Supply - Incoming** 1

Primary (Input) Volts \_\_\_\_\_ VAC  
 Short Circuit Capability \_\_\_\_\_ Isc (Amps)  
 WYE-Delta Connection: Y  N   
 Grounded  Ungrounded

**Motor Name Plate Data** 14

Manufacturer \_\_\_\_\_  
 \*HP \_\_\_\_\_ \*Volts \_\_\_\_\_  
 RPM \_\_\_\_\_ FLA \_\_\_\_\_ S.F. \_\_\_\_\_  
 KVA/Code \_\_\_\_\_  
 Design \_\_\_\_\_ Frame \_\_\_\_\_  
 RTD and type Note: Select only if required.  
 100 Pt  10 Cu  100 Ni  120 Ni

**PCC (Point of Common Coupling)** 2

\*Harmonic Restrictions at PCC: Y  N   
 IEEE519-1992  Not Applicable

**Options** 15

Start P/B  Local/Remote Sw.   
 Stop P/B  Potentiometer   
 Emergency Stop  Pilot Lights:   
 P/B  - Run/Stop   
 HOA Switch  - Forward/Reverse   
 Forward P/B  - Jog   
 Reverse P/B  - Power   
 Jog Forward P/B  - Fault   
 Jog Reverse P/B   
 Fault Reset P/B   
 Other \_\_\_\_\_

**Other Connected Loads** 3

\*Are PFCCs present?  
 Yes  No   
 Please provide additional details in comment section.

**Enclosure** 16

\*UL Type \_\_\_\_\_ (1, 3R, 4, 4X, 12)  
 \*Ambient temperature range \_\_\_\_\_°C to \_\_\_\_\_°C  
 \*Altitude 0 to 3300 ft. (1,000m)  Other \_\_\_\_\_  
 Cable Entry/Exit Locations \_\_\_\_\_  
 Enclosure Size Restrictions  
 H \_\_\_\_\_ W \_\_\_\_\_ D \_\_\_\_\_

**Feeder Cable** 4

Cable Length \_\_\_\_\_ (from transformer)  
 Non-Shielded  Shielded

**\*Main Disconnect** 5

Breaker  Fusible Disc  Line Fuses   
 KAIC Rating \_\_\_\_\_  
 Note: Standard is 65KAIC.

**Control** 17

Keypad  Multi-Motor   
 Terminal  Master  Follower   
 # Analog Inputs \_\_\_\_\_ Other   
 # Analog Outputs \_\_\_\_\_ Please specify: \_\_\_\_\_  
 # Digital Inputs \_\_\_\_\_  
 # Relay Outputs \_\_\_\_\_  
 Note: Provide any additional details in Notes field on Pg. 2

**Input Isolation Contactor** 6

Yes  No   
 IEC Rated  NEMA Rated

**\*Harmonic Suppression** 7

Input Line Reactor 3  or 5  % Imp.  
 Transformer   
 Passive Filter   
 18 Pulse   
 RFI/EMI Filter

**\*VFD Ratings** 8

Constant Torque  Variable Torque   
 CT: 150% for 60 sec, VT: 110% for 60 sec.  
 Note: Provide motor ratings in section 14.

**Communications** 18

DeviceNet  ModBus RTU   
 Ethernet IP  ModBus TCP   
 Profibus  Other \_\_\_\_\_

**Dynamic Braking** 9

Load Type: Decel Only  Overhauling   
 Duty Cycle 5%  10%  25%  50%  100%

**Meters** 19

Motor Amps \_\_\_\_\_ Motor Volts \_\_\_\_\_  
 Frequency \_\_\_\_\_ RPM \_\_\_\_\_  
 Other (Please Specify)

**Output Filter** 10

Reactor  Long Lead  Sine Wave   
 150 ft. ~ 300ft.    300 ft. ~ 1500 ft.    > 1500 ft.

**Bypass** 11

3 Contactor  Soft Start   
 For Contactor Ratings: Rated HP  NEMA

**Application Details** 20

Regenerative   
 Speed Range \_\_\_\_\_ to \_\_\_\_\_ RPM  
 Torque vs. Speed Curve   
 Holding Brake required? Y  N

**Overload** 12

For ATL By-pass only: Class 1-40 \_\_\_\_\_

**Cable Length** 13 See 10

Length \_\_\_\_\_ Ft \_\_\_\_\_ M \_\_\_\_\_  
 Cable Specification:  
 Non-Shielded   
 Shielded

# VFD Pre-Sale Check Sheet



**\*Load Details** 

*Note: Each load type lists application type - Variable or Constant Torque.*

*VT = Variable Torque, 110% overload for 60 sec. CT = Constant Torque, 150% overload for 60 sec.*

<b>Fan</b>		<b>Pump</b>	
Fin Fan Cooler	VT <input type="checkbox"/>	Centrifugal Pump	VT <input type="checkbox"/>
Cooling Tower Fan	VT <input type="checkbox"/>	Centrifugal Compressor	VT <input type="checkbox"/>
<b>Conveyor</b>		Electrical Submersible Pump (ESP)	VT <input type="checkbox"/>
Screw Conveyor	CT <input type="checkbox"/>	PD Pump	VT <input type="checkbox"/>
Belt Conveyor	CT <input type="checkbox"/>	Slurry Pump	VT <input type="checkbox"/>
Flat Conveyor	CT <input type="checkbox"/>	<b>Oil Pump</b>	
Bucket Conveyor	CT <input type="checkbox"/>	Pumpjack (PG)	CT <input type="checkbox"/>
Air Conveyor	CT <input type="checkbox"/>	Progressive Cavity Screw Pump (PCP)	CT <input type="checkbox"/>
		<b>Extruder</b>	
		Single Extruder	CT <input type="checkbox"/>
		Dual Extruder	CT <input type="checkbox"/>
		Piston Extruder	CT <input type="checkbox"/>
		<b>Other</b>	
		Centrifuge	CT <input type="checkbox"/>
		Canter Line	CT <input type="checkbox"/>
		Single-phase input	VT/CT <input type="checkbox"/>
		Other Not Listed Above - Please Specify: _____	

**Additional Comments:**

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