



Form DG5

PACIFIC GAS AND ELECTRIC COMPANY GENERATION PRE-PARALLEL INSPECTION

Name of Project: _____
Location: _____

1. Maintenance Data:

Generation Customer's Maintenance Chief _____
Telephone Number _____
Generation Customer's Regular Maintenance Interval _____
Electrical Contractor _____

2. Test Reports Attached: Yes _____ No _____

If not, who has the reports: _____

3. Generation Facility Manual Disconnect Device for PG&E Line Clearances:

Manufacturer _____
Model Number _____
PG&E Device Number _____

4. Designated PG&E Electric Control Center _____

5. PG&E Inspector _____
NAME PHONE NO.

Date Inspection Performed: _____
Date Facility Placed on 30 Day Test Released: _____



Form G5-1

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1a. Generator Nameplate: _____ kW _____ Volts _____ Pf _____ 1φ _____ 3φ

b. Generator Type:	Synchronizing:	Connection:
_____ Synchronous	_____ Auto	_____ WYE-Ground
_____ Induction	_____ _____	_____ WYE-Ungrounded
_____ DC w/ Inverter	_____ _____	_____ Delta

Manufacturer _____ Serial No. _____

c. Generator Prime Mover:

Wind _____ Water _____ Steam _____ Solar _____ Fuel Cell _____

Bio Mass _____ Other, specify _____

d. Generator Breaker:

Manufacturer _____ Serial No. _____

_____ DC Shunt Trip(if fault detection is required) w/battery _____
 _____ Control Voltage (AC Holding Coil)
 _____ Others _____

2. Dedicated Transformer: Yes _____ 3φ _____ 1φ _____ 3-1φ _____
 No _____ Bank of 3-1φ _____

Customer owned Transf. _____ PG&E owned _____
 Bank Rating: _____ KVA Transformer _____ % _____ MVA Base _____

Transformer Connection: Primary _____ volts
 Secondary _____ volts

Protected by: Fuse Size _____ Amps _____ Other _____

3. Ground Protection Required: Yes _____ No _____

If Yes, type of ground detection (check type):

_____ Ground Bank with overcurrent relay.
 _____ Broken Delta Ground Bank with low pick up overvoltage relay.
 _____ Ground Overcurrent relay in neutral or dedicated transformer.
 _____ Low voltage pick up overvoltage relay in elevated neutral of dedicated transformer.
 _____ Other _____