## LV Overcurrent and Earth-Fault Protection Relay Test Record

### Additional Information:
- Relay: motor protection relay
- Trip setting range: .............. A
- Manufacturer:
- Type
- Contactor rating: .............. A
- P.O. No.:
- Motor FLC: .............. A

### Location
- Switchboard No.
- Panel No.

### Reference Document:

**Note:** All activities are HOLD points and must be witnessed by Company’s Supervisor and manufacturer’s representative, if on site.

### Primary Injection Test

1.0 Primary injection test

At selected trip setting .............. A

All three phases connected in series

<table>
<thead>
<tr>
<th>Test current % setting</th>
<th>300</th>
<th>300</th>
<th>120</th>
<th>105</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current, A</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Relay condition</td>
<td>cold</td>
<td>warm</td>
<td>warm</td>
<td>warm</td>
</tr>
<tr>
<td>Relay time, seconds</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Curve time, seconds</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(supplied by manufacturer)

Earth-fault relay
- Setting .............. A
- Measured pick-up current .............. A

Relay setting after test:
- Thermal relay .............. A
- Earth-fault relay .............. A
- Setting sealed

### Remarks:

Witnessed by:

Manufacturer’s representative: __________________________

Date: __________________________

### Accepted for Subcontractor

Name: __________

Signature: __________

Date: __________

### Accepted for Company

Name: __________

Signature: __________

Date: __________

### Accepted for Client

Name: __________

Signature: __________

Date: __________

*Company only initials for holdpoint*