

# AKLAN ELECTRIC COOPERATIVE, INC.

Lezo, Aklan

## INSPECTION REPORT

Name \_\_\_\_\_ Address: \_\_\_\_\_ Date \_\_\_\_\_  
( ) Residential ( ) Commercial ( ) Industrial ( ) Pub. Bldg.

### INSTALLATION COMPONENTS

- |  |  |                                      |
|--|--|--------------------------------------|
| 1. Date Housewired _____                   |  | Membership Fee O.R. No. _____        |
| 2. Main Safety Switch Rating _____ amps.   |  | Date Paid _____                      |
| 3. Branch Safety Switch Rating _____ amps. |  | Coop Service Charge O.R. No. _____   |
| 4. Main Fuse Rating _____ amps.            |  | Date Paid _____                      |
| 5. Branch Fuse Rating _____ amps.          |  | Amount Paid _____                    |
| 6. No. of Branch Circuit _____ amps.       |  | Connection Fee O.R. No. _____        |
| 7. Cut-out Fuse Rating _____ amps.         |  | Date Paid _____                      |
| 8. Main Circuit Breaker _____ amps.        |  | Transfer of Meter Fee O.R. No. _____ |
| 9. Branch Circuit Breaker _____ pcs.       |  | Date Paid _____                      |
| 10. No. of Switch _____ pcs.               |  | Separate Meter Fee O.R. No. _____    |
| 11. No. of Lighting Outlet _____ pcs.      |  | Date Paid _____                      |
| 12. No. of Convenience Outlet _____ pcs.   |  | Site/Pole No. _____                  |

13. Type of Wiring Methods Used:  
( ) NM ( ) Split knob & Tube Works  
( ) Rigid Steel Conduct ( ) PVC Pipe

14. Other Loads:  
a. \_\_\_\_\_  
b. \_\_\_\_\_  
c. \_\_\_\_\_  
d. \_\_\_\_\_  
e. \_\_\_\_\_

Distance from Tapping point to the house: \_\_\_\_\_ meters.

- ATTACHMENTS:**
- a. ( ) Bldg. & Electrical Permits
  - b. ( ) Certificate of Completion
  - c. ( ) Certificate of Occupancy
  - d. ( ) Electrical Safety Certificate
  - e. ( ) Electrical Inspection Certificate
  - f. ( ) Electrical Plan
  - g. ( ) Location Plan
  - h. ( ) Sketch

### REMARKS/RECOMMENDATIONS

- ( ) Installation conforms with NEA-AKELCO accepted standard  
Installation should be ( ) Improved  
( ) Changed to conform with the NEA AKELCO standard

OTHER RECOMMENDATIONS:

Aknowledge: \_\_\_\_\_ Inspected by: \_\_\_\_\_ Noted by: \_\_\_\_\_

House/Bldg. Owner  
In-Charge of the Establishment/  
Building

Area Supervisor