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| **Form A3-2 Part 2** | | | |
| **Power Generating Module** reference or name |  | | |
| **Information to be enclosed.** | | | |
| Description | | | Confirmation \* |
| Schedule of protection settings (may be included in circuit diagram) | | | Yes / No\* |
| **Commissioning Checks.** | | | |
| The **Interface Protection** settings have been checked and comply with EREC G99. | | | Yes / No\* |
| The **PGM** successfully synchronises with the **DNO**’s **Distribution Network** without causing significant voltage disturbance. | | | Yes / No\* |
| The **PGMError! Bookmark not defined.** successfully runs in parallel with the **DNO**’s **Distribution Network** without tripping and without causing significant voltage disturbances. | | | Yes / No\* |
| The **PGM** successfully disconnects without causing a significant voltage disturbance, when it is shut down. | | | Yes / No\* |
| **Interface Protection** operates and disconnects the **DNO**’s **Distribution Network** quickly (within 1 s) when a suitably rated switch, located between the **PGM** and the **DNO**’s incoming connection, is opened. | | | Yes / No\* |
| The **PGM** remains disconnected for at least 20 s after switch is reclosed. | | | Yes / No\* |
| Loss of tripping and auxiliary supplies. Where applicable, loss of supplies to tripping and protection relays results in either **PGM** lockout or an alarm to a 24 hour manned control centre. | | | Yes / No\* |
| \*Circle as appropriate. If “No” is selected the **Power Generating Facility** is deemed to have failed the commissioning tests and the **Power Generating Module** shall not be put in service. | | | |
| Additional comments / observations: | | | |
| Declaration – to be completed by **Generator** or **Generator’s** Appointed Technical Representative. | | | |
| I declare that for the **Power Generating Module** within the scope of this EREC G99, and the installation:  1. Compliance with the requirements of EREC G99 and EREC G100 is achieved.  2. The **Power Generating Module** is **Fully Type Tested**.  3. The commissioning checks detailed in this Form A3-2 Part 2 have been successfully completed. | | | |
| Name: | | | |
| Signature: | | Date: | |
| Company Name: | |
| Position: | | | |