

2026 CDN. VAUGHAN MAINTENANCE

EVENT REV 2

Electrical Check Sheet

Team name: _____

Date: _____

Electrician name: _____

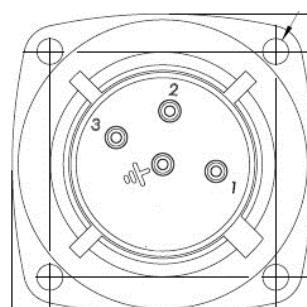
Power Supply Voltage: _____

Motor Final Voltage

Motor: ID Tag Operating Amperage: _____

Power Cable

T1 to Ground	_____	List ohms
T2 to Ground	_____	List ohms
T3 to Ground	_____	List ohms
T1 to T2	_____	List ohms
T2 to T3	_____	List ohms
T1 to T3	_____	List ohms



The condition of the power cable? Good _____ Bad _____
The condition of the control cable? Good _____ Bad _____

Final Voltage Check

L1 – L2 _____
L1 – L3 _____
L2 – L3 _____

Have all electrical Checks been complete and recorded? Yes _____ No _____

Safety Supervisor

Signature