



# Waukesha® UZD® LTC Major Inspection Form

TRANSFORMER DESCRIPTION	INFORMATION	NOTES/EXPLANATIONS
Manufacturer		
Year Manufactured		
Serial Number		
High Voltage		
Low Voltage		
MVA		
Substation Name		
Transformer Designation		
<b>INSPECTION DATA</b>		
Date of Inspection		
Inspected by		
<b>ANNUAL INSPECTION</b>		
Annual Inspection Requirements (see Annual Inspection Form)	<input type="checkbox"/> Completed	
<b>SWITCH COMPARTMENT (LIQUID FILLED) TAP SELECTOR SWITCHES</b>		
Measure Remaining Arcing Tip on Stationary Tap Selector Switch Contacts (54 Contacts)	PHASE A _____ Average in mm _____ Worst in mm _____ Position	
	PHASE B _____ Average in mm _____ Worst in mm _____ Position	
	PHASE C _____ Average in mm _____ Worst in mm _____ Position	
Gap between Tap Selector Switch Roller Contacts (18 Gaps)	PHASE A _____ Average in mm _____ Worst in mm _____ Position	
	PHASE B _____ Average in mm _____ Worst in mm _____ Position	
	PHASE C _____ Average in mm _____ Worst in mm _____ Position	
Measure Roller Diameters (36 Rollers)	PHASE A _____ Average in mm _____ Worst in mm _____ Position	
	PHASE B _____ Average in mm _____ Worst in mm _____ Position	
	PHASE C _____ Average in mm _____ Worst in mm _____ Position	
Confirm Rollers Turn Freely	<input type="checkbox"/> Y <input type="checkbox"/> N	
Check Roller Contact Pressure (18 Rollers)	PHASE A _____ Average in lbs _____ Worst in lbs _____ Position	
	PHASE B _____ Average in lbs _____ Worst in lbs _____ Position	
	PHASE C _____ Average in lbs _____ Worst in lbs _____ Position	
Check Main Current Carrying Tap Selector Switch Contact Pressure	PHASE A _____ Average in lbs _____ Worst in lbs _____ Position	
	PHASE B _____ Average in lbs _____ Worst in lbs _____ Position	
	PHASE C _____ Average in lbs _____ Worst in lbs _____ Position	
Check Contact Pressure of Slip Ring (Bow-Tie) Contacts	A ___ lbs B ___ lbs C ___ lbs A ___ lbs B ___ lbs C ___ lbs	
Check Proper Contact Alignment in All Tap Positions in Both Directions and Adjust, if necessary	<input type="checkbox"/> OK <input type="checkbox"/> Adjustments Made	
Check Transition Resistor	A ___ Ω B ___ Ω C ___ Ω	
	A ___ Ω B ___ Ω C ___ Ω	
Contact Resistance Measurement (hub of bow-tie to fixed contact)	A ___ μΩ B ___ μΩ C ___ μΩ	

continued on next page...

SWITCH COMPARTMENT (LIQUID FILLED) TAP SELECTOR SWITCHES <i>continued</i>	INFORMATION	NOTES/EXPLANATIONS
Were Any Contacts Replaced (include photos)?	<input type="checkbox"/> Y <input type="checkbox"/> N	Which ones:
Liquid Level Gauge and Contact Functioning	Trips at correct level? <input type="checkbox"/> Y <input type="checkbox"/> N	
Check for Leaks	<input type="checkbox"/> No Leaks <input type="checkbox"/> Leaks	Location:
All Protective Devices Functioning Properly	<input type="checkbox"/> Y <input type="checkbox"/> N	If no, which devices:
<b>REVERSING CHANGE OVER SELECTOR (REVERSING) SWITCHES</b>		
Check Contact Pressure of Reversing Switches (6)	A ___ lbs B ___ lbs C ___ lbs A ___ lbs B ___ lbs C ___ lbs	
Check Contact Pressure of Slip Ring (Bow-Tie) Contacts	A ___ lbs B ___ lbs C ___ lbs A ___ lbs B ___ lbs C ___ lbs	
Check Proper Contact Alignment in Both Tap Positions	<input type="checkbox"/> Good <input type="checkbox"/> Needs Adjustment	
Contact Resistance Measurement (hub of bow-tie to fixed contact)	A ___ $\mu\Omega$ B ___ $\mu\Omega$ C ___ $\mu\Omega$	
Were Any Contacts Replaced (include photos)?	<input type="checkbox"/> Y <input type="checkbox"/> N	Which ones:
<b>SPRING DRIVE COMPARTMENT (DRY COMPARTMENT)</b>		
Check for Leaks	<input type="checkbox"/> No Leaks <input type="checkbox"/> Leaks	Location:
Check Nylon Brake Roller for Wear and Play; Replace, if necessary	<input type="checkbox"/> OK <input type="checkbox"/> Replaced	
Verify Brake Only Engaged when Roller is in Slot and Stops within Range; Adjust Brake, if necessary	<input type="checkbox"/> OK <input type="checkbox"/> Required Adjustment	
Apply Lubrication per Field Maintenance Manual, Figure 23 (page 35)	<input type="checkbox"/> Completed	
Check Access Panel Gaskets; Replace, if necessary	<input type="checkbox"/> OK <input type="checkbox"/> Replaced	
<b>MOTOR DRIVE MECHANISM COMPARTMENT</b>		
Apply Lubrication in BUE Motor Drive Mechanism per Field Maintenance Manual, Figures 32–35 (pages 44–46)	<input type="checkbox"/> Completed	
Check Both Indicator Flag and Flywheel Brakes for Proper Adjustment	<input type="checkbox"/> Completed	
Check Wiring and Controls	<input type="checkbox"/> Completed	
Check Limit Switch Operation	<input type="checkbox"/> Completed	
Check Mechanical Stop Operation	<input type="checkbox"/> Completed	
<b>GENERAL</b>		
Describe Any Other Conditions Found or Areas of Concern (include photos)		
Oil Filled Compartment Door Gasket Replaced?	<input type="checkbox"/> Y <input type="checkbox"/> N	
Check of 90 Regulating Relay	<input type="checkbox"/> Completed	

For assistance or more information, please contact our Waukesha® Components group at 800-338-5526.