



Y-W ELECTRIC ASSOCIATION, INC.

BOX Y • 250 MAIN AVENUE • AKRON • COLORADO 80720
(970) 345-2291 • 800-660-2291 • Fax (970) 345-2154 • www.ywelectric.coop

A Touchstone Energy® Cooperative 

FAULT CURRENT DATA REQUEST FORM

CUSTOMER SECTION:

Customer Name: _____ Phone Number: _____

Mailing Address, City, State, ZIP: _____

Account or Service Location Number (if known): _____

If Account or Service Location Number is not known, provide a detailed description of the location for fault current analysis. This request will not be acted upon without adequate information to determine the exact service location.

Detailed Description of Service Location: _____

By signing and submitting this Fault Current Data Request Form, the customer acknowledges that these values are subject to change without notice. These values are valid with the existing facilities to the point noted by the engineer below and under the normal operating conditions for both Y-W Electric Association, Inc.'s (the "Cooperative") and its power supplier's system as of the date on this letter. The Cooperative will not inform the customer or any of the customer's representatives of any transformer or system changes, either temporary or permanent, that may affect the provided fault current data. By providing the information in this form, the Cooperative does not assume responsibility for any damage to any of customer's, or customer's agents', successors' and assigns', property, and as consideration for Cooperative providing this information, **customer hereby releases Cooperative from any and all claims that may be legally released arising out of or relating to the furnishing of information in this Form.**

Customer Signature

Date

The actual customer's information must be filled in on this form and customer must sign the form for this data to be released. Contact details and signatures of contractors or consultants will not be accepted. Complete the form down to this point, sign it, and mail or hand-deliver the original to:

Y-W Electric Association, Inc.
ATTN: System Engineer
250 Main Ave
PO Box Y
Akron, CO 80720

COOPERATIVE SECTION:

Account Number: _____

Service Type: Primary Secondary
 Single phase Three phase

If service type is secondary: Transformer kVA: _____ Single phase Three phase

Primary Voltage: _____ Secondary Voltage: _____

Configuration: Delta Wye % Z: _____

For arc-flash, equipment sizing, or any studies other than for the use of variable-frequency drives (where the stiffness of the distribution system must be ascertained), the Cooperative strongly recommends fault current calculations be completed using the above information and infinite bus on the transformer's high side. However, expected fault current values at the above service location are also shown below.

Expected fault current values at: primary level transformer secondary terminal delivery point

Max LLL(G): _____ Max LLG: _____ Max LL: _____ Max LG: _____

I hereby certify that this fault current analysis was prepared by me or under my direct supervision and that I am a duly registered Professional Engineer in the State of: Colorado Nebraska.

(Engineer's seal)

Engineer's Signature

Date