



230 N Orange Ave Brea, CA 92821-4026
 Contractors License # 655104 C-10, A, B
 Phone: 714/990-9280
 Fax: 714/990-9285



PACIFIC INDUSTRIAL ELECTRIC INVENTORY

DATE: May 21, 2004

LOCATION: Consignment **ITEM INV. #** 67 **PIE ITEM #** _____

DESCRIPTION: TRANSFORMER, DRY

MFG. NAME: SQUARE D **CATALOG NO.:** _____

MODEL# 300T13H **SERIAL #:** 203022

SPECIFICATIONS / INFORMATION

<p>VOLTS: <u>2400</u> <u>208/120</u></p> <p>AMPS: _____</p> <p>PHASE: <u>3</u></p> <p>Hz: <u>60</u></p> <p>POLES: <u>3</u></p> <p>KVA: <u>300</u></p> <p>PRIMARY: <u>2400</u></p> <p>SECONDARY: <u>208-120</u></p> <p>k AIC: _____</p>	<p>NEMA TYPE: <u>1</u></p> <p>FUSEABLE: <u>NO</u></p> <p>FUSE TYPE: <u>NO</u></p> <p>HEIGHT: <u>68"</u></p> <p>LENGTH: <u>56"</u></p> <p>WIDTH: <u>36"</u></p> <p>WEIGHT: <u>2550</u></p> <p>KIRK KEY: <u>NO</u></p> <p>NEW: <u>NO</u></p> <p>PHOTO FILE: <u>YES</u></p>
---	--

NOTES:



230 N Orange Ave Brea, CA 92821-4026
 Contractors License # 655104 C-10, A, B
 Phone: 714/990-9280
 Fax: 714/990-9285



TRANSFORMER NAME PLATE DATA

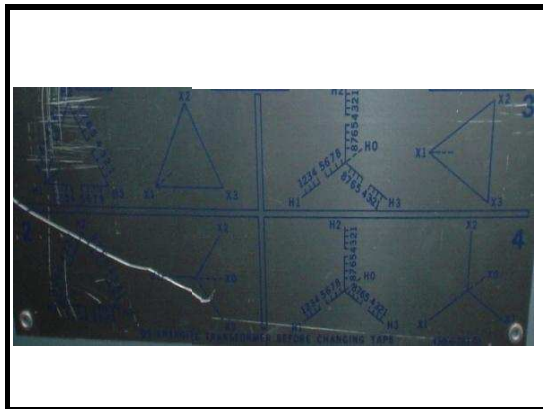
MANUFACTURE'S ADDRESS:

NAME: SQUARE D
 STREET 1: _____
 STREET 2: _____
 CITY: _____
 STATE: _____
 ZIP: _____

PHONE #: _____
 FAX #: _____

D.O.M. _____	COOLING CLASS: <u>AA</u>
OIL FILLED: <u>NO</u>	CATALOG #: <u>0</u>
GAL. CAP. : _____	INSULATION SYS.: _____
SHIELDING: _____	RISE: <u>150° C</u>
DELTA / WYE: <u>D/D, D/W, W/D, W/W</u>	LIVE FRONT: <u>YES</u>

NOTES: 4.7% IMPEDENCE



CONN.TAPS	VOLTAGE
4 - 5	2520
4 - 6	2460
3 - 6	2400
3 - 7	2340
2 - 7	2280

INVENTORY REMOVAL DATE: _____

PURPOSE: _____

