

NIE Networks job number:		
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 <b>Interface Protection</b> settings have been checked and comply with EREC G99.	Yes / No*	
The <b>PGM</b> successfully synchronises with the <b>DNO</b> 's <b>Distribution Network</b> without causing significant voltage disturbance.	Yes / No*	
The <b>PGM</b> <sup>Errorl Bookmark not defined.</sup> successfully runs in parallel with the <b>DNO</b> 's <b>Distribution Network</b> without tripping and without causing significant voltage disturbances.	Yes / No*	
The <b>PGM</b> 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 <b>PGM</b> 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 <b>PGM</b> lockout or an alarm to a 24 hour manned control centre.	Yes / No*	
*Circle as appropriate. If "No" is selected the <b>Power Generating Facility</b> the commissioning tests and the <b>Power Generating Module</b> shall not be		
Additional comments / observations:		

 $\label{lem:completed} \mbox{Declaration} - \mbox{to be completed by } \mbox{\bf Generator} \mbox{ or } \mbox{\bf Generator's} \mbox{ Appointed Technical Representative}.$ 

I declare that for the Power Generating Module within the scope of this EREC G99, and the





installation:	
<ol> <li>Compliance with the requirements of EREC G99 and EREC G100 is achieved.</li> <li>The Power Generating Module is Fully Type Tested.</li> <li>The commissioning checks detailed in this Form A3-2 Part 2 have been successfully completed.</li> </ol>	
Name:	
Signature:	- Date:
Company Name:	
Position:	