



Intact Insurance Company

Electrical Inspection Questionnaire

Customer Name:	
Address:	
Policy #:	Date Completed:
Broker Name:	

Service Amps	<input type="checkbox"/> 60A	<input type="checkbox"/> 100A	<input type="checkbox"/> 120A	<input type="checkbox"/> 150A	<input type="checkbox"/> 200A	<input type="checkbox"/> 400A	<input type="checkbox"/> Other
Protection	<input type="checkbox"/> Regular Fuses	<input type="checkbox"/> Circuit Breakers	<input type="checkbox"/> T/R Fuses	Date Panel Installed:			
Main Breaker	<input type="checkbox"/> Part of Main Panel	<input type="checkbox"/> Separate	<input type="checkbox"/> None				
Sub Panels?	<input type="checkbox"/> Yes	If Yes, Date Installed:					<input type="checkbox"/> No

Wiring

Knob & Tube Wiring	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Percentage:		
Are there any signs of tampering with the wiring?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> No		
Is the insulation deteriorated around the Knob & Tube Wiring?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> No		
Is there any new insulation around the Knob & Tube Wiring?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> No		
Aluminum Wiring	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Percentage:		
Are there any unapproved devices connected to A1 connectors?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Are there any live exposed splices?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is there a voltage drop at receptacles of more than 5%?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Are there any incorrect or excess cables?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are any cover plates missing?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Are there loose or incorrect boxes or loose connections?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are there any incorrect wire or box connectors?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Is there any incorrect wiring?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Receptacles and Switches

Is the polarity correct?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Are there any missing or damaged cover plates?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are there any ungrounded 3-prong receptacles?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Are there any loose or incorrectly mounted switches or receptacles?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is GFCI or ground protection required?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Are there any worn out or faulty switches or receptacles?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are there any faulty GFCI receptacles?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Are there any missing or damaged cover plates?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Comments:

Fuse Panel / Circuit Breaker Panel					
Are there any Oversized Breakers?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Is the panel grounded properly?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Sufficient Number of Circuits for Usage?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Are there any openings present?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are there any Oversized Fuses?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Are there any broken, cracked or faulty ACB?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Tie-Bar on 240 volt ACB?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Is the feeder cable the correct size and type?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Double Taps on Fuses or Breakers?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Is the feeder cable fastened correctly?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is the panel mounted properly?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Are branch circuits grounded properly?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is the panel cover secure?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Is the conductor overheating?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is the panel located in the proper location?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Are box connectors missing?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Comments: _____					
Service					
Is the service capacity sufficient for the building load?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Is there any sign of deterioration of the service conductors?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is the meter and/or conduit in the correct location?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Is neutral damaged or incorrect?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is the meter and/or conduit securely attached?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Are any tree branches touching overhead conductors?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are there any signs of tampering with the meter and/or conduit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Are any overhead conductors frayed or damaged?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is the Emily knob loose or detached?	<input type="checkbox"/> Yes	<input type="checkbox"/> No		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Comments: _____					
Overall Assessment of the Electrical System					
<input type="checkbox"/> ACCEPTABLE		<input type="checkbox"/> MINOR UPDATES REQUIRED		<input type="checkbox"/> MAJOR UPDATES REQUIRED	
If repairs/updates are required, has the necessary work been done?				<input type="checkbox"/> Yes	<input type="checkbox"/> No
If No, have repairs/updates been scheduled?		<input type="checkbox"/> Yes	If Yes, Date:		<input type="checkbox"/> No
Electrical Contractor's Name:					
Phone Number: ()			Certification/License Number:		
If repairs or updates are required, please provide details: _____					