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| **Акт визуального осмотра измерительного комплекса** | | | | | | | | |
|  | | |  | | **Район** |  | | |
| **Потребитель:** | |  | | | | | |  |
| **Энергоснабжаемый объект:** | | |  | | | | | дата посещения |
|  | | |  | | | | |  |
|  | Должность | | | Фамилия | | | Телефон | |
|  | Руководитель | | |  | | |  | |
|  |  | | |  | | |  | |
|  | Бухгалтер | | |  | | |  | |
|  | Энергетик | | |  | | |  | |
|  | Прием телефонограмм | | |  | | |  | |
|  | Ответственный за электрохозяйство | | |  | | |  | |
|  |  | | |  | | |  | |
|  | Главный механик | | |  | | |  | |
|  | Инженер | | |  | | |  | |
|  | Начальник | | |  | | |  | |

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| **ЭИ:** |  | |
| **Сетевая организация:** |  | |
| **Котлодержатель:** |  | |
| **Наличие субабонентов:** |  | **Наличие АСКУЭ:** |

**Точка подключения:**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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Задание: Прошу осмотреть электроустановку (ИК) на предмет **проверки схемы электроснабжения**

Основание: **обращение**; входящий **№** , дата

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| --- | --- | --- | --- | --- | --- |
| Специалист: |  | / |  | / Дата: |  |
|  | (ф.и.о.) |  | (подпись) |  |  |

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| **Результаты визуального осмотра** |
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**Уведомляю, что:**

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| --- | --- | --- | --- |
| **истекает/истек срок поверки прибора учета** |  | | |
| *№ прибора учета, квартал, год* | | | |
| *№ прибора учета, квартал, год* | | | |
| **истекает/истек срок поверки трансформаторов тока (напряжения)** | | |  |
| *№ трансформаторов тока/напряжения, квартал, год* | | | |
| *№ трансформаторов тока/напряжения, квартал, год* | | | |
| **Вам необходимо своевременно произвести очередную поверку** | |  | |
| *(прибор учета, трансформаторов тока, трансформатор напряжения)* | | | |

**Проведение поверки организовать в соответствии с условиями действующего договора энергоснабжения.**

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| --- | --- | --- | --- | --- |
| **Представитель Потребителя** |  |  |  | **Представитель АО «Петербургская сбытовая компания»** |
|  |  |  |  |  |
|  |  |  |  |  |
| "\_\_\_\_\_" \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 20\_\_\_\_ г. |  |  |  | "\_\_\_\_\_" \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 20\_\_\_\_ г. |

Оператор: