



**GREEN WAVE
DISTRIBUTION**

182 Torrey Road
South Kingstown, RI 02879
(401) 285 0202

Project # : _____
Worksheet # : _____
Date: _____



Warranty Registration Form

(One Sheet per Transformer)

1) Temperature Readings

Outside Temp: _____ °F
Indoor Target Temp: _____ °F
Indoor Actual Temp: _____ °F

2) Primary Voltage

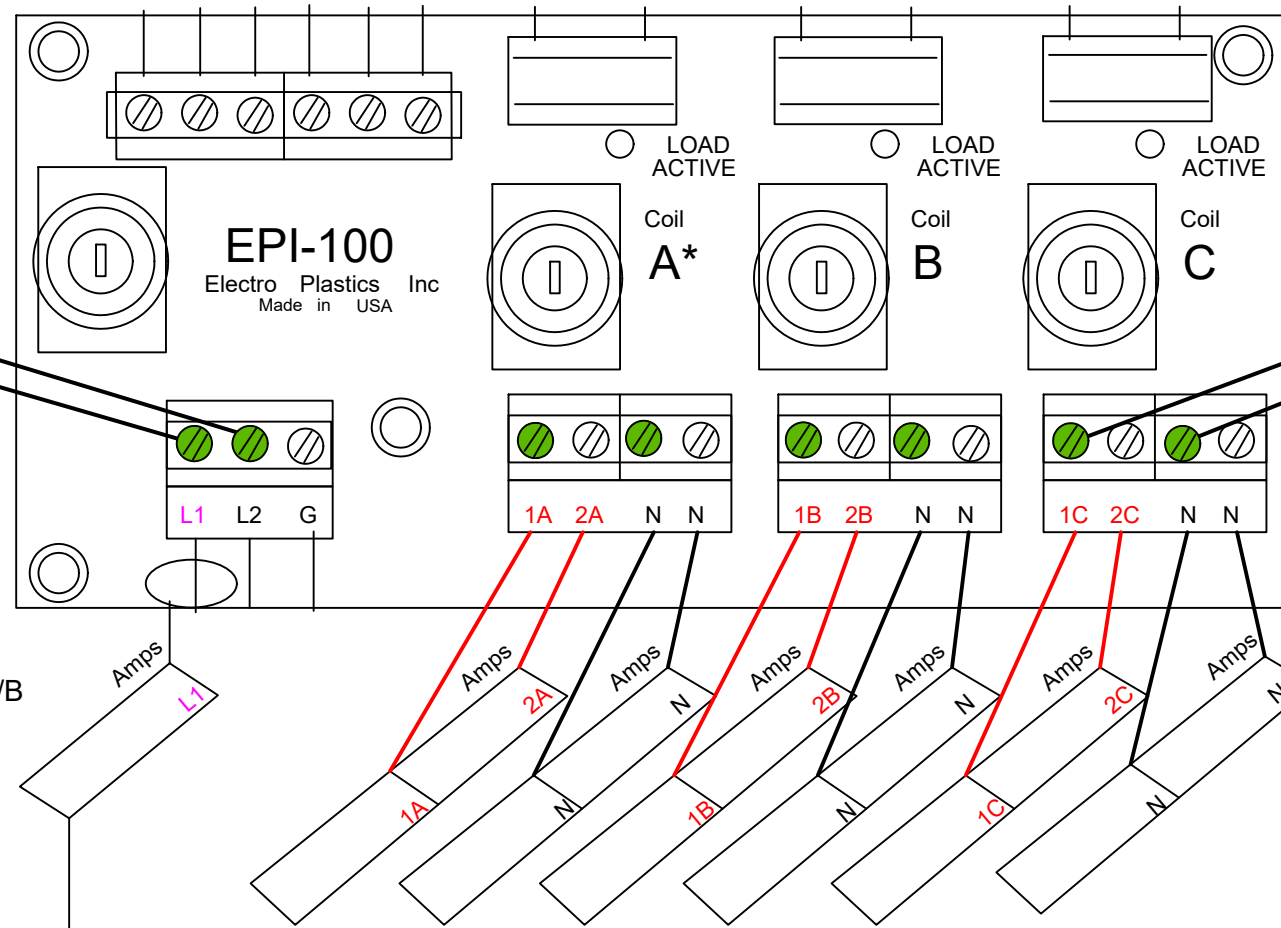
_____ V

3) Secondary Voltage

_____ V Coil-A*
_____ V Coil-B
_____ V Coil-C

Instructions

- 1) Record temperature -°F
- 2) Measure primary voltage -V
- 3) Measure secondary voltage -V
- 4) Measure primary amperage -L1
- 5) Measure secondary amperage for each coil circuit -R/B



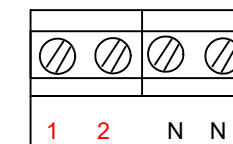
4) Primary Amperage

Amps L1

5) Secondary Amperage

Amps 1A Amps 2A Amps N Amps N
 Amps 1B Amps 2B Amps N Amps N
 Amps 1C Amps 2C Amps N Amps N

*Single coil transformers do not have a letter designation (enter readings in coil A section)



Single coil terminals strip

To activate warranty complete and return this warranty registration card signed : Green Wave Distribution LLC, 182 Torrey Rd. South Kingstown, RI 02879 or Email to Pschlawinsky@greenwavedist.com

Installed / Measured by:

Signature

Name (Print)

Company

Phone/Email