

TRANSOCKET REQUEST

COMPANY: _____

CONTACT NAME: _____

ADDRESS: _____

PHONE #: _____

E-MAIL: _____

INITIAL PURCHASE QTY: _____

ANNUAL USE QTY: _____

1. MATERIAL:

G90 STEEL
ALUMINUM

2. SOCKET:

TRANSOCKET
FLASH SENTRY
STANDARD METER SOCKET
SAFETY METER SOCKET (GRAY)
SAFETY METER SOCKET (CLEAR)
OTHER _____

3. FINISH:

LIGHT GRAY POWDER COAT
PADMOUNT GREEN POWDER COAT
MILL ALUMINUM

4. MAX FOOTPRINT: H _____ W _____ D _____

5. SERVICE RATING: MAX AMP _____

VOLTAGE _____

6. KNOCKOUTS:

STANDARD (1 EACH SIDE, 1 BACK, 3 BOTTOM). GROUND (1 BOTTOM)

OTHER: _____

7. HUB:

BLANK HUB QTY: _____
PLATE
OPEN NPT SIZE: _____
OTHER _____

8. WIRING:

WIRING FORM: _____

9. COVER:

ALL TRANSOCKETS ARE 1 PIECE RINGLESS COVER

10. WIRE SIZE:

#10 _____
#12 _____
#14 _____

11. TYPE:

THHN STRANDED
THHN SOLID

12. ARE TRANSFORMERS REQUIRED: YES NO

VOLTAGE TRANSFORMERS:

PREFERRED MANUFACTURER: _____

TYPE: _____ PART # _____

PRIMARY/SECONDARY VOLTAGE: _____

CURRENT TRANSFORMERS:

PREFERRED MANUFACTURER: _____

TYPE: _____ PART # _____

ACC CLASS: 0.3 0.15 0.155

RATIO: _____

