



Recreation Engineering, Inc.

Motor Resistance Measurement Record

Ride/Device Name: _____ Manufacturer: _____

Serial #: _____ ID #: _____

Purpose of Electric Motor: _____

Testing Required?: YES NO (Circle one) Spare in Stock?: YES NO (circle one)

Motor Information:

Motor Mfg.: _____ Serial No.: _____

HP: _____ Hz: _____ RPM: _____ Frame: _____

Voltage: _____ Amperage: _____ Phase: _____ Duty Cycle: _____

Testing Log:

DATE	RESISTANCE	AMBIENT TEMP.	HUMIDITY	COMMENTS	TEST EQUIPMENT	TESTER'S NAME

Repair Log:

DATE	REPAIR PERFORMED	SERVICE COMPANY NAME	COMMENTS

General Comments: _____

