



## Community Electrification Section (CES)

### ONE YEAR GUARANTEE CHECK FOR MICRO HYDRP /PICO HYDRO PLANTS

**General Instructions:**

1. Photographs showing functional status and specific problems noticed should be attached in the report
2. Fill all information requested in the format and provide comments as necessary
3. Use additional sheets if space provided is not sufficient

**A. General Information:**

Site visit team:

Date: .....

SN	Name	Designation	Signature
1	..... (Representative Local Level Representative )		
2	..... (Representative Users' Committee)		
3	..... (Representative from Installer)		

Project Name:

Location (District) :

Na.Pa. / Ga.Pa. :

Gross Head:\_\_\_\_(m)      Design Discharge:\_\_\_\_(l/s) Installed capacity: \_\_\_\_ (kW)

No. of HH:\_\_\_\_\_      Subscribed power per HH: \_\_\_\_\_ Watt

Ownership:            (I) Private(II) community (III) Other, Specify \_\_\_\_\_

Name of Installation Company: \_\_\_\_\_

Date of operation of the plant: \_\_\_\_\_

Date of Official Testing and Commissioning: \_\_\_\_\_

Date of Official One year guarantee check: \_\_\_\_\_

Any problems reported at the time of Official Testing and Commissioning \_\_\_\_\_ Yes/No

If Yes, What were the problems and have they been addressed by the time of one-year guarantee check

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**B. Technical Aspect:****(I) Civil Structures: Quality of works:**

Items	Quality Aspect & Operational problems noticed
1. Intake	
2. Gravel trap	
3. Headrace	
4. Crossings if any	
5. Settling basin	
6. Forebay	
7. Anchor blocks & Support piers	
8. Penstock alignment	
9. Power house	
10. Machine foundation	
11. Tail Race	

**History of floods and landslide:**

Year and Month	Parts damaged	Cost of R & M	Plant shutdown period

**(II) Electromechanical Installation: Quality of works:**

Items	Quality Deviation / Operational problems noticed
Gate Valve	
Turbine:	
Drive system:	
Generator:	
Load Controller:	
Transmission and distribution:	
Service Main:	
Earthing and lightning protection:	
Transformers:	
Other items (if any):	

**Observation on Dynamic situation**

a. Vibration on machine: noticeable / unnoticeable
b. Noise: Normal and Uniform ( ) Abnormal and Non uniform: ( )
c. Generator body temperature: Normal warm ( ) / hot ( ) / too hot ( )
d. Bearing temperature (Turbine): (Generator):
e. Meter readings and condition:
g. Voltage at sending end and fluctuation with in observation time:
h. Frequency deviation:
i. Voltage at far most receiving end:
j. Others.



**AEPC Quality Assurance System -MH/PH/QM-OYGC#**

**Comments/Suggestions on Quality of Works:**

Your Comments on the major quality deviation from AEPC-CE Standard & Operational problems noticed:

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What are the major recommendation that you would like to made in the civil parts from quality aspects:

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What are the major recommendations that you would like to make in the Electro-mechanical Parts:

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**Overall Quality of Works:**

- What components/ equipment's are still not supplied or not installed which were proposed in the design/contract? What impacts will these changes have?

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- Services provided by the installation Company (Contractor):  
During first year of operation: Satisfactory ( ) / unsatisfactory ( ) / poor ( )

Further comments from the developer:

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**C. Market aspects:**

Household Demand

Total Household connected:		Household estimated to be connection during Connection:				
Subscribed power	...W	...W	...W	...W	...W	...W
No. of HH						
Limit switch type						
Remarks						

Details of entrepreneurs/end use owners:

S N	Entrepreneurs	End uses	Capacity (kW)	Operating hours per day	Operation days/year	Tariff
1.						
2.						
3.						
4.						

Specific comments/concern that the entrepreneurs/end use developer have

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**D. Socio-economic aspects:**

- Community participation:
  
- Involvement of community during tariff determination:
  
- Perception of the villagers:



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- Is there any conflict between users and owner?
  
- Mention if there are any problems from the user side.

**E. Institutional aspects**

- Users Committee/Developer contribution/commitment/services:
  
- Availability of the Manager/operators and their services:

**F. Financial aspects:**

**Record Keeping:**

Is log book being kept and regularly filled? ..... Yes/No

Is account book being kept and regularly filled? ..... Yes/No

Is the plant able to collect the tariff in time? If not how difficult is there in the collection and what are the reason behind such difficulties?

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**History of short/long term shut down of the scheme:**

Components/parts failed	Date of short down	No of days	Cost of Repair and maintenance



**G. Repair and Maintenance:**

Is there a maintenance schedule?..... Yes/No

Do the operator/manager follow the maintenance schedule?..... Yes/No

Is oiling and greasing done regularly?..... Yes/No

If yes, how frequently:.....

Is operational/maintenance and trouble shooting manual available and used? Yes/No

Has the availability of water for turbine reduced after installation.....Yes/No, if Yes mention the Reason:

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Which spare parts and tools are kept and maintained?

Spare Parts		Tools	
Description	Remarks/Condition	Description	Remarks/condition

Is there any specific spares part or tool that had been proposed but not supplied by the Installer/ Manufacturer? If yes mention the component and also try to explore the reason behind?

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**H. Comments:**

1. Management committee Chairman

2. Manager/Operator

3. Your Overall comments:



मिति : २०७७/...../.....

श्री वैकल्पिक ऊर्जा प्रवर्द्धन केन्द्र  
मध्यबानेश्वर, काठमाण्डौ

विषय: सिफारिस गरिएको सम्बन्धमा ।

प्रस्तुत विषयमा ..... प्रदेश ..... जिल्ला .....  
गा.पा./न.पा. वडा नं ..... मा सञ्चालनमा रहेको ..... किलोवाट क्षमताको  
..... पिको/लघु जलविद्युत आयोजनाबाट ..... घरधुरीहरूमा विद्युत सेवा पुगेको  
छ । उक्त आयोजनाले शक्ति उत्पादन परीक्षण तथा समुदायमा हस्तान्तरण भएको मितिले एक वर्ष सम्म  
निरन्तररूपमा बिना अवरोध विद्युत सेवा पुऱ्याईरहेको र आयोजनामा जडानकर्ता कम्पनी र उपभोक्ताबीच  
कुनै समस्या नदेखिएकोले त्यस केन्द्रबाट नियमानुसार अनुदानको अन्तिम किस्ताको भुक्तानीको प्रक्रिया  
अगाडि बढाइदिनुहुन सिफारिस गर्दछु ।

हस्ताक्षर : .....

नाम : .....

पद : .....

गा.पा./न.पा. :.....

मोवाइल नं.: .....

कार्यालयको छाप :