Generator Information for
_________________________________ (facility name)

Generator

Vendor name, contact information, and account number:
________________________________________________________________________
________________________________________________________________________

Fuel distributor, contact information, and account number:
________________________________________________________________________
________________________________________________________________________

What areas of the facility are supplied with power by the generator?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Type, size, phase, and voltage of generator:
________________________________________________________________________
________________________________________________________________________

Fuel type ____________________________
Fuel capacity (gallons or pressure) ____________________________
Fuel duration (hours) ____________________________
Is the fuel tank above or below ground? ____________________________
Is the generator above the projected flood level?
________________________________________________________________________

How and when is generator tested? ____________________________
Description of how generator will be refilled and fuel resupplied during an emergency event:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
Does the generator have “quick-connect” capability? ________________________________

Indicate location of point to which external generator could be connected if needed (simple plan):