

Test Report issued under the responsibility of:



TEST REPORT
IEC/EN 60947-2
Low-voltage switchgear and controlgear - Part 2: Circuit-breakers



Report Reference No.: 00901-CB2010CCC-028451-M1/A2
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CB/CCA Testing Laboratory: Shanghai Testing & Inspection Institute for Electrical Equipment Co., Ltd(STIEE)
Address: 505 Wu Ning Rd. Shanghai 200063, P.R. CHINA

Applicant's name: Zhejiang Tengen Electric Co., Ltd.
Address: Sulv Industrial Area, Liushi Town, Yueqing City, Zhejiang Province, P.R.China

Test specification:

Standard: [X] IEC 60947-2:2006 (4th Edition) and/or [ ] EN 60947-2:2006 (4th Edition)
Test procedure: CB
Non-standard test method: N/A

Test Report Form No.: IECEN60947\_2B
Test Report Form(s) Originator: KEMA
Master TRF: Dated 2008-10

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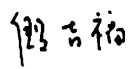
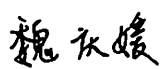
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Test item description: Moulded Case Circuit-breakers
Trade Mark: TENGEN
Manufacturer: Zhejiang Tengen Electric Co., Ltd.
Model/Type reference: TGM1-63
Ratings: Ue: AC415V
In: 10A,16A,20A,25A,32A, 40A,50A,63A

Testing procedure and testing location:	
<input checked="" type="checkbox"/> <b>CB/CCA Testing Laboratory:</b> Testing location/ address .....:	Shanghai Testing & Inspection Institute for Electrical Equipment Co., Ltd(STIEE) 505 Wu Ning Rd. Shanghai 200063, P.R. CHINA
<input type="checkbox"/> <b>Associated CB Laboratory:</b> Testing location/ address .....:	N/A N/A
Tested by (name, function, signature) .....:	Yin Jifu/Engineer 
Approved by (name, function, signature) .....:	Wei Qingyuan/Senior Engineer 
<input type="checkbox"/> Testing procedure: TMP Tested by (name + signature)..... : Approved by (+ signature)..... : Testing location/ address .....:	N/A N/A N/A N/A
<input type="checkbox"/> Testing procedure: WMT Tested by (name + signature)..... : Witnessed by (+ signature) ..... : Approved by (+ signature)..... : Testing location/ address .....:	N/A N/A N/A N/A N/A
<input type="checkbox"/> Testing procedure: SMT Tested by (name + signature)..... : Approved by (+ signature)..... : Supervised by (+ signature) ..... : Testing location/ address ..... :	N/A N/A N/A N/A N/A
<input type="checkbox"/> Testing procedure: RMT Tested by (name + signature)..... : Approved by (+ signature)..... : Supervised by (+ signature) ..... : Testing location/ address .....:	N/A N/A N/A N/A N/A