



Republic of the Philippines  
**National Electrification Administration**

26 July 2006

**NEA MEMORANDUM No. 2006-021**

**T O : ALL ELECTRIC COOPERATIVES**

**SUBJECT : SCORECARD ON CORPORATE GOVERNANCE  
FOR ELECTRIC COOPERATIVES (ECs)**

The Scorecard on Corporate Governance (SCG) is a tool to assess the overall performance or health profile of ECs at all levels, and identify their strengths and weaknesses in order to improve their ability to face stiff competition in the restructured power industry. Enclosed is mechanics of the SCG.

The performance measures by which ECs are to be assessed are the financial, technical, institutional and information technology perspectives. The institutional perspective has a new dimension, and that is the critical role of the Board of Directors. Its sound and effective governance shall be measured by its ability to ensure that the EC attains institutional stability, financial viability and technical efficiency through its corporate decisions and required management actions.

The major bases of measuring ECs performance are the progress made in achieving the targets set in the ICPM, and the primary data that will be collected through a set of Questionnaires as well as the Cross Validation on EC information and services that shall be done by NEA. As feedback mechanism, the result of the SCG shall be sent to the ECs as a guide in instituting corrective measures to improve operation. The same results shall be used in the overall performance evaluation of ECs.

The Scorecard on Corporate Governance shall take effect immediately, and shall be undertaken on a semestral basis, beginning the second half of this year for selected ECs, and for all ECs next year, 2007.

The ECs are enjoined to participate and fully comply with the requirements of the SCG to truly reflect their overall performance.

*Edita S. Bueno*  
**EDITA S. BUENO**  
Administrator

NATIONAL ELECTRIFICATION  
ADMINISTRATION  
IN REPLYING, PLS. CITE: #OR008983



*we*  
*7/26/06*

# SCORECARD ON CORPORATE GOVERNANCE FOR ECs

## I. BACKGROUND

Corporate governance has emerged as the key element defining the character of corporations and determining their performance. It deals with the manner by which firms are directed and controlled and by which accountability and transparency for corporate decisions and management actions are established.

Given that corporate governance impacts on performance, in the measurement of ECs performance, it is necessary to find out critical factors that contribute to their performance. In the past, the monitoring or assessment of ECs performance was based on identified nine (9) Key Performance Indicators (KPI). However, this may not be enough to assess the overall strengths and weaknesses of ECs since there are other vital areas of concerns or perspectives which were not measured (i.e. customer perspective as well as internal perspective).

In this regard, a new mechanism is hereby adopted in the monitoring and assessment of ECs performance through the Scorecard on Corporate Governance for Electric Cooperatives (SCG).

## II. OBJECTIVE

The Scorecard shall be used as a tool to assess the overall performance or health profile of ECs at all levels and identify strengths and weaknesses in order to improve their ability to compete in the deregulated environment.

## III. METHODOLOGY

A. Identify/establish performance measure/area by which ECs are to be monitored. Each performance measure/area has an assigned weight (in %) depending on its importance. The basis of measuring ECs performance is on the progress made in achieving the targets set in their ICPM..

B. Review of secondary data like the MFSR, Audit Report and MER. Result of KPI shall be determined using the MFSR as the source document.

C. Develop Survey Questionnaire to collect primary data. There will be three sets of Questionnaire for: ICPM Institutional Activities, ICPM Technical Activities, and Information Technology.

D. Send the Questionnaire to 71 ECs (AMGD) and 47 ECs (MAG).

- E. Cross validation on EC information and services shall be done by NEA through community groups such as the Multi-Sectoral Electrification Advisory Council (MSEAC), composed of representatives who are member-consumers of ECs, among others.
- F. The returned Questionnaires, results of KPIs and cross validation will be given scores and analyzed to identify ECs strengths and weaknesses.
- G. As feedback mechanism, the SCG shall be sent to the ECs for them to institute corrective measures to improve operation.

#### **IV. AREAS OF PERFORMANCE ASSESSMENT**

<b><i>A. Financial Perspective</i></b>	<b><u>30%</u></b>
Ave. Days Receivable	8%
Net Margin	6%
Non Power Cost / Customer	5%
Payment to National Electrification Administration	5%
Payment to GENCO	4%
Payment to National Transmission Corporation	2%
<b><i>B. Technical Perspective</i></b>	<b><u>30%</u></b>
System Loss Reduction	10%
System Loss Segregation	5%
Reliability	5%
Project Implementation	5%
Power Quality	3%
Power Factor	2%
<b><i>C. Institutional Perspective and Information Technology</i></b>	<b><u>40%</u></b>
Corporate Governance	10%
Human Resource Development	6%
Member-Consumer Development	6%
Image Building Activities	4%
District Election	2%
Annual General Membership Assembly	2%
Information Systems/Systems Applications	3%
Operational Website	2%
Inter-Connectivity/Internet Access	2%
Information Communication Technology Planning	2%
Video and Audio Conferencing Facility	1%
Other ICT Innovations	Bonus
<b>TOTAL</b>	<b><u>100%</u></b>

## V. OVERALL RATING PERFORMANCE

<b>Total Scores</b>	<b>Adjectival Rating</b>
90 – 100%	- Outstanding (5 ★ ★ ★ ★ ★ )
75 – 89 %	- Very Satisfactory (4 ★ ★ ★ ★ )
60 – 74%	- Satisfactory (3 ★ ★ ★ )
50 - 59%	- Fair
49 below	- Poor

## VI. FREQUENCY OF ASSESSMENT

The performance assessment shall be conducted on a semestral basis to start this year.

# QUESTIONNAIRE ON INFORMATION & COMMUNICATION TECHNOLOGY

Name of EC: \_\_\_\_\_

*This is one of a 3-part questionnaire to serve as a monitoring tool that will measure the effectiveness of the institutional, technical and information technology activities. Focusing mainly on information technology activities, your answers shall reveal the coop's standing and the contributions of these activities in the improvement of its overall operations. Please return the accomplished questionnaire to NEA-AMGD on or before May 15, 2007. Thank you very much.*

**I. Information Systems/ System Applications**

1. What part of your Meter Reading, Billing & Collection (MRBC) System is computerized?

	Operational	
	Yes	No
a) meter reading	_____	_____
b) billing	_____	_____
c) collection	_____	_____
d) tellering	_____	_____

Are you using hand held device? (PSION, Rover, etc.) Yes \_\_\_\_ No \_\_\_\_

2. Other than the MRBC, do you have other operational computerized system ?

Yes \_\_\_\_ No \_\_\_\_ . Please check below:

a.) Accounting	_____
b.) Member Consumer Monitoring	_____
c.) Payroll, HRIS, Inventory etc.)	_____
d.) Others, _____	_____

**II. Inter-connectivity/ Internet Access**

3. Do you have an operational/active Local Area Network System (LAN) ? Yes \_\_\_\_ No \_\_\_\_

Please indicate number of servers \_\_\_\_\_ workstations \_\_\_\_\_

Do you have an active internet connection/internet service provider? Yes \_\_\_\_ No \_\_\_\_

Please check below:

a.) Broadband _____	Speed _____ (MBPS)	_____	Dedicated?
b.) DSL _____	Speed _____	Yes _____	No _____
c.) Modem/Dial up _____	Speed _____		
d.) Others, _____			

**III. Information Communication Technology Planning (ICT Planning)**

4. Do you have any of the following: Yes No Status

A. ICT Plan (3 to 5 years)	_____	_____	_____
B. Project Plan (3 to 5 years)	_____	_____	_____
C. Information System Plan (3 to 5 years)	_____	_____	_____
D. ICT Procurement Plan (3 to 5 years)	_____	_____	_____

**IV. Operational Website** (optional to Island EC)

5. Do you have a Website? Yes \_\_\_\_ No \_\_\_\_

Please check status/level :

Level

- a) Static
- b) Dynamic
- c) With web enabled transactions (SMS, Electronic Banking, Billing, etc.)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please indicate website address: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Do you have your own electronic mail facility for the coop other than standard yahoo, Gmail, Hotmail, etc.? Yes \_\_\_\_ No \_\_\_\_

**V. Video & Audio Conferencing Facility** (Not applicable to Island EC)

6. Do you have the following:	Operational	
	Yes	No
a) video conferencing	_____	_____
b) RQIM facility	_____	_____

6.1 Did you have an active/consistent RQIM connection for the last 9 to 12 mos ?  
Yes \_\_\_\_ No \_\_\_\_ If not, please cite reason/s: \_\_\_\_\_

**VI. Other ICT Innovations**

7. Do you have other ICT Innovations like:	Yes	No
a) Broadband Over Power lines (BPL)	_____	_____
b) Open Source (OS) based applications	_____	_____
c) Others _____ (you can prepare separate sheet if necessary)		

Accomplished by:

\_\_\_\_\_  
MIS Head/Officer/LAN Administrator

Date: \_\_\_\_\_

Concurred by:

\_\_\_\_\_  
General Manager

\_\_\_\_\_  
Board President

Date: \_\_\_\_\_

# ICPM INSTITUTIONAL ACTIVITIES QUESTIONNAIRE

Name of EC: \_\_\_\_\_

*This is one of a 3-part questionnaire to serve as a monitoring tool that will measure the effectiveness of the institutional, technical and information technology activities as listed down by the coop in their respective ICPMs. Focusing mainly on institutional development, your answers shall reveal the coop's standing and the contributions of these activities in the improvement of its overall operations. Please return the accomplished questionnaire to NEA-AMGD on or before May 15, 2007. Thank you very much.*

## **GOOD GOVERNANCE**

	YES	NO
1. Have your Board Directors attended the Seminar on Good Corporate Governance?	<input type="checkbox"/>	<input type="checkbox"/>
2. Is there a Corporate Governance Policy formulated by the board?	<input type="checkbox"/>	<input type="checkbox"/>
3. Is there an enforcement program for such policy?	<input type="checkbox"/>	<input type="checkbox"/>
4. Have your Board Directors adopted policies on the following?		
a. Transparency (e.g. procurement, availability of minutes of board meeting, etc.)	<input type="checkbox"/>	<input type="checkbox"/>
b. Compliance to audit recommendation	<input type="checkbox"/>	<input type="checkbox"/>
c. Code of conduct for EC BOD	<input type="checkbox"/>	<input type="checkbox"/>
d. Others (specify)	<input type="checkbox"/>	<input type="checkbox"/>
5. Do you have trainings on EPIRA and other issues/concerns that would capacitate the BOD to ensure their effective participation in Board activities?		
a. WESM	<input type="checkbox"/>	<input type="checkbox"/>
b. Open access	<input type="checkbox"/>	<input type="checkbox"/>
c. Others (specify)	<input type="checkbox"/>	<input type="checkbox"/>
6. Does your Board conduct an annual evaluation to assess its performance based on:		
a. Monitoring/evaluation of EC financial performance	<input type="checkbox"/>	<input type="checkbox"/>
b. Formulation of policies to attain ICPM objectives	<input type="checkbox"/>	<input type="checkbox"/>
c. Audit recommendations	<input type="checkbox"/>	<input type="checkbox"/>
7. Does your Board evaluate the performance of the GM? How often?	<input type="checkbox"/>	<input type="checkbox"/>
a. Quarterly	<input type="checkbox"/>	<input type="checkbox"/>
b. Semi-annually	<input type="checkbox"/>	<input type="checkbox"/>
c. Annually	<input type="checkbox"/>	<input type="checkbox"/>
8. In what way does the board monitor management vis-à-vis the objectives set in the ICPM?		
a. Submission of reports	<input type="checkbox"/>	<input type="checkbox"/>
b. Board meetings	<input type="checkbox"/>	<input type="checkbox"/>
c. Review of Annual report	<input type="checkbox"/>	<input type="checkbox"/>
d. Review of Audit report	<input type="checkbox"/>	<input type="checkbox"/>
9. Are there specialized committees organized to support the Board in performing its functions?		
a. Oversight committee	<input type="checkbox"/>	<input type="checkbox"/>
b. Financial committee	<input type="checkbox"/>	<input type="checkbox"/>
c. Technical committee	<input type="checkbox"/>	<input type="checkbox"/>

- |   |                          |                          |
|---|--------------------------|--------------------------|
| d. Administrative committee   | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Audit committee  | <input type="checkbox"/> | <input type="checkbox"/> |
| f. Grievance committee  | <input type="checkbox"/> | <input type="checkbox"/> |
| g. Others (specify)   | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. How often do these specialized committees meet?   |                          |                          |
| a. Once a month   | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Twice a month  | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Others (specify)   | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. How often does the Board meet with the employees?   |                          |                          |
| a. Quarterly  | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Semi-annually  | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Others (specify)   | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Does your Board of Directors have working knowledge/background on:  |                          |                          |
| a. Legal matters  | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Financial matters  | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Technical operations   | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Management principles  | <input type="checkbox"/> | <input type="checkbox"/> |
| e. EPIRA (Open Access/ WESM)  | <input type="checkbox"/> | <input type="checkbox"/> |
| f. ERC Decisions (Rates, CAPEX, Compliances, etc.)  | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. Does your Internal Audit Group implement strictly the audit standard procedures and controls to ensure compliance with relevant laws, regulations and established business practices? |                          |                          |
| a. Internal control on cash/collection  | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Internal control on materials /equipment/supplies  | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Close out of Construction Work in Progress (CWIP)  | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Others (specify)   | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. Do you conduct policy implementation audit to determine whether policies are strictly implemented?  |                          |                          |
|   | <input type="checkbox"/> | <input type="checkbox"/> |
| 15. Is your Internal Audit Manager monitored by or submit reports to the Board through the Audit Committee? How often?  |                          |                          |
| a. Monthly  | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Quarterly  | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Annually   | <input type="checkbox"/> | <input type="checkbox"/> |

## **HUMAN RESOURCE DEVELOPMENT**

- |  | YES                      | NO                       |
|--|--------------------------|--------------------------|
| 1. Have you implemented an organizational re-structuring attuned to the needs of the reformed electricity environment? |                          |                          |
| a. Energy Trading Office   | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Corporate Planning/Info. Tech. Office   | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Assets Management Div.  | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Others (specify)  | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Do you regularly hold employee assemblies?<br>How often? _____  | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Do you conduct management committee meetings?<br>How often? _____   | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Do you have an existing performance evaluation system?  | <input type="checkbox"/> | <input type="checkbox"/> |



5. Do you have training programs related to EPIRA, WESM and Corporate Culture? Pls. specify  YES  NO  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
6. Have you developed a training assessment program to evaluate the effectiveness of your trainings?  YES  NO
7. Do you strictly implement the EC Code of Ethics/Discipline?  YES  NO

**MEMBER-CONSUMER DEVELOPMENT**

**A. Customer Service**

1. What is the coop's consumer-employee ratio? \_\_\_\_\_
2. Have you complied with the Customer Service Standards as required in the Distribution Code?  YES  NO

If yes, please indicate the measure of performance for each Customer Service Standard:

	<b>TARGET</b> <small>(specify no. of days / no. of hours)</small>	<b>ACTUAL</b>
a. Processing of application for electric connection including estimates of charges	_____	_____
b. Service connection	_____	_____
c. Restoration of service after a fault interruption on the secondary side, including service drop/lateral	_____	_____
d. Power quality complaints	_____	_____
e. Informing customers on schedule of power interruptions	_____	_____
f. Responding to emergency calls	_____	_____
g. Billing queries and complaints	_____	_____
h. Payment queries and complaints	_____	_____
i. Meter complaints	_____	_____
j. Reconnection of service	_____	_____
k. Making and keeping of appointments	_____	_____

**B. Customer Feedback**

- |   |                          |                          |
|---|--------------------------|--------------------------|
| 1. Which of the following is practised for consumer feedback? |                          |                          |
| a. Survey/questionnaire                                       | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Suggestion box   | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Short Messaging System (SMS)                               | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Others (specify)   | <input type="checkbox"/> | <input type="checkbox"/> |

**IMAGE BUILDING ACTIVITIES**

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**A. Practices and Innovations**

- |  |                          |                          |
|--|--------------------------|--------------------------|
| 1. In what way do you disseminate information to your member-consumers?                            | <b>YES</b>               | <b>NO</b>                |
| a. Radio programs  | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Print materials (newsletter, annual report, etc.)   | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Advertisements (TV, radio, print)   | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Pulong Pambarangay  | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Public announcements (rekoreda, etc.)   | <input type="checkbox"/> | <input type="checkbox"/> |
| f. Postings (main/area office bulletin board, etc.)  | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Which of the following do you practice to build the coop's image?                               |                          |                          |
| a. Political networking  | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Consultations with GOs and NGOs   | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Media connections   | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Consumer Relations Program  | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Community projects  | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Have you introduced any innovation to facilitate your institutional activities?<br>Pls. specify | <input type="checkbox"/> | <input type="checkbox"/> |
| _____  |                          |                          |
| _____  |                          |                          |
| _____  |                          |                          |

**B. Consumer Groups**

- |  |                          |                          |
|--|--------------------------|--------------------------|
| 1. Do you organize/revitalize District Electrification Committees/<br>Member-Consumer Electrification Committees (DEC/MCEC)?                       | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Does your DEC/MCEC actively participate in your info dissemination<br>activities and other programs that would improve EC over-all performance? | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. How often do you conduct meetings/consultations with your DEC/MCEC?   |                          |                          |
| a. Monthly   | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Quarterly   | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Semi-annually   | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Others (specify)  | <input type="checkbox"/> | <input type="checkbox"/> |

**DISTRICT ELECTION**

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- |  |                          |                          |
|--|--------------------------|--------------------------|
|  | <b>YES</b>               | <b>NO</b>                |
| 1. Do you regularly hold district elections? |                          |                          |
| a. As per the by-laws                        | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Deferred with NEA approval                | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Others ( specify)                         | <input type="checkbox"/> | <input type="checkbox"/> |

2. What is level of participation of member-consumers? Average of:
  - a. 10% below
  - b. 11% - 20%
  - c. Above 20%

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

**ANNUAL GENERAL MEMBERSHIP ASSEMBLY**

- |  | YES                      | NO                       |
|--|--------------------------|--------------------------|
| 1. Do you regularly hold your AGMA?  |                          |                          |
| a. As per the by-laws  | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Deferred with NEA approval  | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Others ( specify)   |                          |                          |
| 2. What is the number of attendees during your last AGMA?                          |                          |                          |
| a. Total number of attendees _____   |                          |                          |
| b. Percentage of attendance _____  |                          |                          |
| 3. What is your biggest number of attendance on record for the last 5 years? _____ |                          |                          |
| 4. Do consumer groups actively participate in your AGMA?                           | <input type="checkbox"/> | <input type="checkbox"/> |

Date accomplished: \_\_\_\_\_

Accomplished by: \_\_\_\_\_  
ISD Manager

Concurred by: \_\_\_\_\_  
General Manager

\_\_\_\_\_  
Board President

## QUESTIONNAIRE ON ICPM TECHNICAL ACTIVITIES

**Name of EC:** \_\_\_\_\_

*This is one of a 3-part questionnaire to serve as a monitoring tool that will measure the effectiveness of the institutional, technical and information technology activities as listed down by the coop in their respective ICPMs. Focusing mainly on technical activities, your answers shall reveal the coop's standing and the contributions of these activities in the improvement of its overall operations. Please return the accomplished questionnaire to NEA-AMGD on or before May 15, 2007. Thank you very much.*

### I. System Loss Segregation

- 1) Is the System Loss Segregation of all feeders completed? Yes  No

Number of Feeder		% Completion
Target	Actual	

### II. System Reliability

- 1) What is the level of the following Reliability Indices?

a) SAIFI

2005	2006

b) SAIDI

2005	2006

c) MAIFI

2005	2006

- 2) Is the installation of your Primary Circuit Breakers completed? Yes  No

Number of C. B.	
Target	Actual

3) Is the installation of your Secondary Circuit Breakers completed?

Yes  No

Number of C. B.	
Target	Actual

4) Is Preventive Maintenance Schedule on substations conducted?

Yes  No

Target	Actual

### III. Project Implementation

1) Is the installation of Power Substation completed?

Yes  No

Capacity  Quantity

Completion Date		%Completion
Target	Actual	

Capacity  Quantity

Completion Date		%Completion
Target	Actual	

Capacity  Quantity

Completion Date		%Completion
Target	Actual	

Capacity  Quantity

Completion Date		%Completion
Target	Actual	

Capacity  Quantity

Completion Date		%Completion
Target	Actual	

2) Is the construction of 69 KV line completed?

Yes

No



Length in kms

Completion Date		% Completion
Target	Actual	

3) Is the energization of Barangays/ Sitios completed?

Yes

No



Number of Barangay	
Target	Actual

Yes

No



Number of Sitio	
Target	Actual

4) Transformer Load Management

4.1 Is the installation of distribution transformers completed?

Yes

No



Number of Distribution Transformer	
Target	Actual

5) Meterings

Is the installation of KWH Meter and Metering equipment completed?

5.1 Replacement of defective KWH Meters

Yes

No



Number of meter	
Target	Actual

5.2 Unmetered consumers

Yes

No

Number of meter	
Target	Actual

5.3 Pole-metering/ Meter Clustering

Yes

No

Number of meter	
Target	Actual

5.4 Primary Metering of 300KVA & above consumers or per EC Metering Application Policy

Yes

No

Number of meter	
Target	Actual

5.5 Feeder Metering

Yes

No

Number of meter	
Target	Actual

6) Distribution System

6.1 Is the rehabilitation of lines completed?

Yes

No

3-Phase (Kms of Lines)	
Target	Actual

2-Phase (Kms of Lines)

Target	Actual

1-Phase (Kms of Lines)

Target	Actual

Open Sec. (Kms of Lines)

Target	Actual

UB Sec. (Kms of Lines)

Target	Actual

6.2 Is the revamp of lines completed?

Yes

No

3-Phase (Kms of Lines)

Target	Actual

2-Phase (Kms of Lines)

Target	Actual

1-Phase (Kms of Lines)

Target	Actual

Open Sec. (Kms of Lines)

Target	Actual

UB Sec. (Kms of Lines)

Target	Actual



6.3 Is the upgrading of lines completed?

Yes

No

3-Phase (Kms of Lines)

Target	Actual

2-Phase (Kms of Lines)

Target	Actual

1-Phase (Kms of Lines)

Target	Actual

Open Sec. (Kms of Lines)

Target	Actual

UB Sec. (Kms of Lines)

Target	Actual

#### IV. Power Quality

1) What is the level of voltage along the feeder for:

1.1 Consumer nearest to the source?

Voltage Level (V)		
Nominal	Actual	% difference

1.2 Consumer at the middle of the feeder?

Voltage Level (V)		
Nominal	Actual	% difference

1.3 Consumer at the end of the feeder?

Voltage Level (V)		
Nominal	Actual	% difference

2) Are your feeders/line load balanced?

Yes  No

Number of Feeder/Line		
Existing	Target	Actual

3) Is the installation of monitoring/recording devices completed?

Yes  No

Number of Monitoring Devices	
Target	Actual

V. Power Factor

1) Is your Power Factor greater than 85%?

Yes  No

Power Factor (%)

Accomplished by: \_\_\_\_\_  
 Technical Manager

Concurred by: \_\_\_\_\_  
 General Manager

Date: \_\_\_\_\_

\_\_\_\_\_  
 Board President

Date: \_\_\_\_\_