

FORM REF	1725IED-FAT-TR-FTRT		
FORM DESCRIPTION	RTU FAT RECORD – REDUNDANCY TEST	FORM VERSION	02
PROJECT DETAILS	RTU SERIAL NO:	PRODUCT DETAILS	DF1725IED RTU
	CONTRACT NO:	TEST RECORD SHEET	38 of 39
FAT – TEST RECORD REF:	CHANNEL REDUNDANCY TEST	RECORD SHEET NO.	1 of 1

Channel Redundancy Test

1.0 IEC101

No.	Procedure	OK	NO
1	Start by polling IEC101 through Main Channel (COM2).	<input type="checkbox"/>	<input type="checkbox"/>
2	Simulate any Digital Input signal and verify ASE2000 received the signal.	<input type="checkbox"/>	<input type="checkbox"/>
3	Do not stop ASE2000 and move the ASE Serial Cable from COM2 to COM3.	<input type="checkbox"/>	<input type="checkbox"/>
4	IEC101 communication will resume through COM3 after around 20 – 30 seconds.	<input type="checkbox"/>	<input type="checkbox"/>
5	Simulate any Digital Input signal and verify ASE2000 receive the data.	<input type="checkbox"/>	<input type="checkbox"/>

2.0 IEC104

No.	Procedure	OK	NO
1	Start by polling IEC104 through Main Channel (Ethernet1).	<input type="checkbox"/>	<input type="checkbox"/>
2	Simulate any Digital Input signal and verify ASE2000 received the signal.	<input type="checkbox"/>	<input type="checkbox"/>
3	Stop ASE2000 and move the LAN Cable from ETH1 to ETH2.	<input type="checkbox"/>	<input type="checkbox"/>
4	Start polling IEC104 again through ETH2.	<input type="checkbox"/>	<input type="checkbox"/>
5	Simulate any Digital Input point and make sure ASE2000 receive the data.	<input type="checkbox"/>	<input type="checkbox"/>

3.0 DNP3

No.	Procedure	OK	NO
1	Start by polling DNP3 through Main Channel (Ethernet1).	<input type="checkbox"/>	<input type="checkbox"/>
2	Simulate any Digital Input signal and verify ASE2000 received the signal.	<input type="checkbox"/>	<input type="checkbox"/>
3	Stop ASE2000 and move the LAN Cable from ETH1 to ETH2.	<input type="checkbox"/>	<input type="checkbox"/>
4	Start polling DNP3 again through ETH2.	<input type="checkbox"/>	<input type="checkbox"/>
5	Simulate any Digital Input point and make sure ASE2000 receive the data.	<input type="checkbox"/>	<input type="checkbox"/>

Tested By:
(Signature/Official Stamp)

Witnessed By:
(Signature/Official Stamp)

Tester's
Name:
Date:

TNB QAI's
Name:
Date: