

COVER Determination Form (non-capital work)



Project Name

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Applicant Information

Date:	
Company Name:	
Site Name:	
Contact Name:	
Phone Number:	
Email Address:	
Hydro One Account Executive Contact Name:	

Project Scope or Description

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Information Requirements (For Hydro One Review)

- Detailed Single Line Diagram (Existing and future SLD of the station identifying the changes)
- Description of Protection Scheme
- SIA/CIA application form or final SIA Report (if applicable)
- New and existing equipment rating comparison (if applicable)

Comments or Additional Information

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Protection and Automation Design Compatibility Determination

No Design Compatibility Review Required
Design Compatibility Review Required (COVER and Design Compatibility Review):
Protection Engineering
Controls Engineering
Telecom/Tele-protection Engineering
Other:

Protection and Automation Review

Summary of P&A impact on the Transmission System

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Summary of COVER Review Scope for Engineering (Protection/Control/Telecom/Metering)

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Protection and Automation Reviewer

Name:	
Title:	
Date Signed:	
Signature:	

COVER Determination	
No COVER Required	
COVER Only (no Design Compatibility Review)	
Design Compatibility Review Required (COVER and Design Compatibility Review):	
Stations Engineering	
Lines Engineering	
Other:	

Transmission System Planning Review	
Summary of Planning impact on the Transmission System	
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Summary of COVER Review Scope	
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Transmission System Planning Reviewer	
Name:	
Title:	
Date Signed:	
Signature:	