STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION
ITS Facility Management System
Access Point (ACC) / Repeater Point (RPT) Attribute Form

ITSFM063
Page 1 of 2
Rev. 01/26

Date:	Inspector:	Site Identification Name:

Equipment Site

General Information	Radio Information

General Information

Facility Owner:_____

County:_____

Point of Attachment (Ft.):_____

Date Installed(yyyy-mm-dd):_____

Feature: ☐ Access Point ☐ Repeater

Feature Type: ☐ Vehicle Detection System

Usage: ☐ Parking Availability ☐ Vehicle Detection

Electric Equipment for ACC/RPT Site

Equipment Cabinet Site Identification Name:

_____

Power Supply Install/Date: ☐ Yes ☐ No_____
Manufacturer:_____
Model/Size:_____
Data Line SPD Install/Date: ☐ Yes ☐ No_____
Manufacturer:_____
Model/Size:_____ Qty:_____
Low Voltage SPD Install/Date: ☐ Yes ☐ No_____
Manufacturer:_____
Model/ Voltage:_____ Qty:_____
Comments:_____
_____
_____

Radio Information

Manufacturer:_____

Model:_____

Serial Number:_____

IP Address:_____

Firmware Version:_____

Radio Frequency:_____

Radio Channel:_____

Power Management System ☐ Yes ☐ No

Date Installed (yyyy-mm-dd):_____

Manufacturer:_____

Model:_____

Serial Number:_____

Receptacle (s):☐ 2 ☐ 4 ☐ 6 ☐ 8 ☐ Other _____

NIC Card Installed: ☐ Yes ☐ No

IP Address:_____

MAC Address:_____

Uninterrupted Power System Installed ☐ Yes ☐ No

Date Installed (yyyy-mm-dd):_____

Manufacturer:_____

Model:_____

Serial Number:_____

Batteries Installed: ☐ Yes ☐ No Qty:_____

Year Battery Installed / Replaced:_____

NIC Card Installed: ☐ Yes ☐ No

Manufacturer:_____

Model/Size:_____

IP Address:_____

MAC Address:_____

Electrical Information for Access Point (ACC) / Repeater Point (RPT)

☐ **Cabinet Electrical Panel** ☐ **Cabinet Disconnect**	**Cabinet Branch Circuits Breakers**

☐ Cabinet Electrical Panel ☐ Cabinet Disconnect

Date Installed (yyyy-mm-dd): _____

Panel/Enclosure Type:

☐ Breaker ☐ Fuse ☐ Non-Fused Switch

☐ Fused Switch

Panel/Enclosure Voltage Rating:

☐ 120 ☐ 120/240 ☐ 120/208 ☐ 240 ☐ 480

☐ 600 ☐ Other_____

Panel/Enclosure Amperage Rating:

☐ 30 ☐ 60 ☐ 70 ☐ 80 ☐ 100 ☐ 125 ☐ 150

☐ 200 ☐ 225 ☐ 250 ☐ 400 ☐ Other_____

Main Breaker Amperage Rating:

☐ 30 ☐ 40 ☐ 50 ☐ 60 ☐ 70 ☐ 80 ☐ 100

☐ 125 ☐ 150 ☐ 200 ☐ 250 ☐ 400 ☐ Other_____

Cabinet Branch Circuits Breakers

Branch Circuit Breakers (Amperage/Qty):

☐ 15 Amp / _____   ☐ 20 Amp / _____

☐ 30 Amp / _____   ☐ 40 Amp / _____

☐ 60 Amp / _____   ☐ 80 Amp / _____

☐ 100 Amp / _____   ☐ 125 Amp / _____

☐ 150 Amp / _____   ☐ 200 Amp / _____

☐ Other: _____ Amp / _____

Cabinet Power Receptacles

Inside Cabinet Power Receptacle(s): ☐ Yes ☐ No

Date Installed (yyyy-mm-dd): _____

Standard Receptacle Qty/Amp: ____ ☐15A ☐20A

GFI Receptacle Qty/Amp: _____ ☐15A ☐20A

Surge Power Strip Installed: ☐ Yes ☐ No

Cabinet Surge Protection

Cabinet Surge Protection Installed: ☐ Yes ☐ No

Date Installed (yyyy-mm-dd): _____

Manufacturer: _____

Model/Voltage: _____

Stand-By Generator Disconnect/ Transfer Switch

The Site (☐ is equipped ☐ is Not equipped) with a Permanent back-up generator.

_____

The Cabinet (☐ is equipped ☐ is Not equipped) with an External Generator Receptacle to support a Portable Back-up Generator.

_____

The Site (☐ is equipped ☐ is Not equipped) with a Transfer Switch.

☐ Indoor ☐ Outdoor

Transfer Switch Type: ☐ Manual ☐ Automatic

Manufacturer: _____

Model: _____

Serial Number: _____

Input Voltage: _____ Output Voltage: _____

Phases: _____ Kilowatt Ratting: _____

Permanent Stand-By Generator

Property Id: _____

Manufacturer: _____

Model: _____

Serial No.: _____

Kilowatt Rating: Prime: _____ KW Stand-by: _____ KW

Output Voltage:

☐ 120 ☐ 120/240 ☐ 240 ☐ 440 ☐ 480 ☐ 600

☐ Other: _____

Number of Phases:

☐ Single Phase ☐ 2 Phase ☐ 3 Phase

☐ Unknown

Fuel Tank Type:

☐ Aboveground ☐ Underground ☐ Unknown

Fuel Type: ☐ Diesel ☐ Propane ☐ Other: _____

Fuel Capacity Gallons: _____