



JABATAN KERJA RAYA MALAYSIA  
CAWANGAN KEJURUTERAAN ELEKTRIK  
UNIT PENSIJILAN BAHAN & STANDARD

TECHNICAL INFORMATION

MOULDED CASE CIRCUIT BREAKER (MCCB)

A. COMPANY INFORMATION						
COMPANY NAME :						
ADDRESS :					TELEPHONE NO :	
					FAX NO :	
					COMPANY EMAIL :	
ISO CERTIFIED COMPANY			REGISTRATION NO:		SCOPE:	
1. ISO 9001	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO	.....	.....
2. ISO 14001	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO	.....	.....
3. ISO 50001	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO	.....	.....
4. ISO .....	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO	.....	.....
B. PRODUCT INFORMATION						
BRAND NAME :						
MODEL : 1. .... 4. ....						
2. .... 5. ....						
3. .... 6. ....						
STANDARD NO.: (MS IEC/IEC/etc.)						
CERTIFICATE OF APPROVAL : (SURUHANJAYA TENAGA, if any)				DATE OF ISSUE:		
				VALID UNTIL:		
PRODUCT CERTIFICATION : LICENSE (SIRIM/OTHER)				DATE OF ISSUE:		
				VALID UNTIL:		
TEST REPORT NO.:				TESTING LABORATORY:		
				DATE OF ISSUE:		
COUNTRY OF MANUFACTURE:						
NAME OF MANUFACTURER:						
FACTORY ADDRESS :						

C. PRODUCT SPECIFICATION / STANDARD (Please ✓ where applicable)					
No.	Description	Yes	No	Test Report No. & Page No. / Catalogue Page	Remarks (For JKR Use)
<b>1.</b>	<b>Classification &amp; Construction</b>				
1.1.	Front-Mounting type.	<input type="checkbox"/>	<input type="checkbox"/>	.....	<input type="checkbox"/>
1.2.	Flush-Mounting type.	<input type="checkbox"/>	<input type="checkbox"/>	.....	<input type="checkbox"/>
1.3.	Plug-in mounting type.	<input type="checkbox"/>	<input type="checkbox"/>	.....	<input type="checkbox"/>
1.4.	Suitable for isolation.	<input type="checkbox"/>	<input type="checkbox"/>	.....	<input type="checkbox"/>
1.5.	No. of pole: <input type="checkbox"/> 2 poles <input type="checkbox"/> 3 poles <input type="checkbox"/> 4 poles	<input type="checkbox"/>	<input type="checkbox"/>	.....	<input type="checkbox"/>
1.6.	For 4 poles, the neutral (N) pole must be protected.	<input type="checkbox"/>	<input type="checkbox"/>	.....	<input type="checkbox"/>
1.7.	Utilization category A.	<input type="checkbox"/>	<input type="checkbox"/>	.....	<input type="checkbox"/>
1.8.	Utilization category B.	<input type="checkbox"/>	<input type="checkbox"/>	.....	<input type="checkbox"/>
1.9.	Resistance to abnormal heat and fire (glow wire test), temperature : .....	<input type="checkbox"/>	<input type="checkbox"/>	.....	<input type="checkbox"/>
1.10.	Fully tropicalised and suitable to be used up to an ambient temperature of 40°C (reference temperature). Ambient compensating curves/temperature current data to be attached.	<input type="checkbox"/>	<input type="checkbox"/>	.....	<input type="checkbox"/>
1.11.	Enclosed in glass-reinforced polyester moulded case and suitable for use on 240/415 V, 50 Hz. a.c. supply system. If No specify material : .....	<input type="checkbox"/>	<input type="checkbox"/>	.....	<input type="checkbox"/>
1.12.	Arc extinguisher incorporated to extinguish the arc between poles.	<input type="checkbox"/>	<input type="checkbox"/>	.....	<input type="checkbox"/>
1.13.	The contacts shall be of non-welding type If No specify type : .....	<input type="checkbox"/>	<input type="checkbox"/>	.....	<input type="checkbox"/>
1.14.	Marking and Labelling : Durables and legibly marked.	<input type="checkbox"/>	<input type="checkbox"/>	.....	<input type="checkbox"/>
1.15.	Conform to MS IEC 60947-1 & MS IEC 60947-2 or equivalent Standard.	<input type="checkbox"/>	<input type="checkbox"/>	.....	<input type="checkbox"/>
1.16.	ASTA / KEMA certification If No specify : .....	<input type="checkbox"/>	<input type="checkbox"/>	.....	<input type="checkbox"/>
<b>2.</b>	<b>Tripping Characteristics</b>				
2.1.	Mechanically and electrically trip-free. (able to break-in all poles simultaneously)	<input type="checkbox"/>	<input type="checkbox"/>	.....	<input type="checkbox"/>
2.2.	2.2.1. Thermal-magnetic type with bimetallic elements for overload protection and magnetic elements for short circuit protection.	<input type="checkbox"/>	<input type="checkbox"/>	.....	<input type="checkbox"/>
	a. Fixed thermal and magnetic trips.	<input type="checkbox"/>	<input type="checkbox"/>	.....	<input type="checkbox"/>
	b. Fixed thermal and adjustable magnetic trips.	<input type="checkbox"/>	<input type="checkbox"/>	.....	<input type="checkbox"/>
	c. Adjustable thermal and fixed magnetic trips.	<input type="checkbox"/>	<input type="checkbox"/>	.....	<input type="checkbox"/>
	d. Adjustable thermal and magnetic trips.	<input type="checkbox"/>	<input type="checkbox"/>	.....	<input type="checkbox"/>
	2.2.2. Solid state trip unit with adjustable overload protection and adjustable short circuit protection with or without adjustable time-delay.	<input type="checkbox"/>	<input type="checkbox"/>	.....	<input type="checkbox"/>
2.3.	Earth Leakage Relay mounting facilities present.	<input type="checkbox"/>	<input type="checkbox"/>	.....	<input type="checkbox"/>

2.4. Current limiting types of mccb shall be equipped with current limiting device of either permanent self-resetting power fuse type or magnetic repulsion moving contact type.   .....

Current limiting device : .....

**3 Short Circuit Breaking Capacity**

3.1. The minimum rupturing capacity (Icw) of the MCCB shall be 50 kA rms (symmetrical) for 1 s at 415 V. (Utilization category B)   .....

3.2. The rated service short-circuit breaking capacity (Ics) shall be 100% of the rated ultimate short-circuit breaking capacity (Icu) at 415 V.   .....

3.3. Ics shall be 50% of Icu. (for all outgoing feeder)   .....

**4. Protection**

4.1. Facilities for the following devices:

4.1.1. Shunt trip.   .....

4.1.2. Under voltage.   .....

4.1.3. Earth fault.   .....

4.1.4. Over current.   .....

4.1.5. Zero current transformer (Z cts).   .....

4.2. Provided with panel mounting external operating handle with padlocking facilities and door interlocking facilities. (Note: Compulsary accessories)   .....

**5. Operating Mechanism**

5.1. **Permanent** position 'ON' and 'OFF' or '0' and '1' indicator present and clearly marked to show status of the breaker.   .....

5.2. When tripping occurs, the handle shall be in the 'trip' position midway between the 'OFF' and 'ON' or '0' and '1' position so as to provide positive indication of automatic interruption.   .....

5.3. The operating mechanism shall be non-tamperable.   .....

5.4. The MCCB shall have trip-free feature to prevent the breaker from being closed against fault conditions.   .....

5.5. Multipole MCCB shall have common-trip operating mechanism for simultaneous operation of all poles.   .....

5.6. Type of handle :

5.6.1. Quick-make and quick-break type.   .....

5.6.2. Toggle operated type.   .....

5.6.3. Motorised mechanism type.   .....

- 5.6.4. Rotary operating mechanism type.   .....
- a. External operating handle.   .....
- b. External extension handle.   .....

**6. Method of Installation**

6.1. Effect on performance of MCCB due to mounting position/direction :

- 6.1.1. Mounting angle = 45°, Rated current = ..... 6.1.4. Mounting angle = 180°, Rated current = .....
- 6.1.2. Mounting angle = 90°, Rated current = ..... 6.1.5. Mounting angle = 225°, Rated current = .....
- 6.1.3. Mounting angle = 135°, Rated current = ..... 6.1.6. Mounting angle = 270°, Rated current = .....

6.2. Safety clearance and minimum distance recommendations for installation in switchboards. Give the details.

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**D. MANUAL/DOCUMENTS (PLEASE SPECIFY) AND ATTACH RELEVANT DOCUMENT.**

1. Technical specification   .....
2. Method of installation   .....
3. Method of maintenance   .....

**E. LIST OF COMPONENTS**

No.	Name Of Part	Manufacturer	Type of Material	Approval Lab	Mill Cert. No. (please attach)
1	Base and Cover				
2	Insulation Barrier				
3	Moving/Fixed Contact				
4	ON / OFF handle				
5	Tripping Bars				
6	Arc Chambers				
7	Bi-Metal				
8	Operating Coil				
9	Rivet				
10	Terminals				
11	Terminals Screws				
12	etc. Please List				



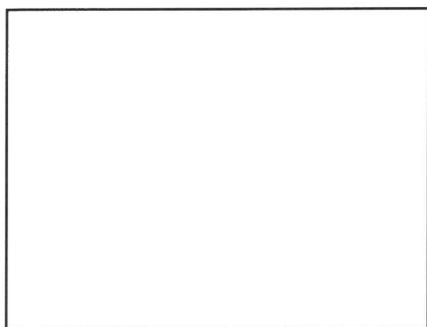
F. OTHERS (please specify)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**G. PENGESAHAN**

Adalah saya ..... dengan ini mengesahkan segala keterangan yang diberikan/dikemukakan bagi produk di atas adalah benar. Jika saya didapati membuat pengakuan **PALSU**, maka tindakan seterusnya boleh diambil oleh pihak JKR ke atas diri dan syarikat diwakili oleh saya.

Cop Syarikat :



Tandatangan : \_\_\_\_\_  
Nama : \_\_\_\_\_  
Jawatan : \_\_\_\_\_  
Tarikh : \_\_\_\_\_

**H. ULASAN (Untuk Kegunaan Pejabat)**

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