DISTRIBUTED GENERATION APPLICATION FORM

1. Contact Information The applicant	is the nerson that is legally responsible for the generating System
1. Contact information-The applicant	is the person that is legally responsible for the generating System
Applicants Last Name	First Name
CNIC of Applicant / CUIN in case of C	ompany (Copy to be attached)
Applicant's Mailing Address	
Applicant's Phone Number & Email A	ddress
Office:	Fax:
Cell:	Email:
Applicant Electricity Bill Detail	
Reference No.	Status of Dues of Electricity:
Name against whom Meter is Installed	d:

Name of Concerned Operation Sub Division:

2. Location of Generation System

Address at Which proposed DG facility is located

Latitude - Longitude (i.e. 49• 32' 06" 18" - - optional)

Size of Proposed DG Facility

Approximate Monthly Energy Proposed to be supplied to HESCO (kWh)

3. Applicant's	Ownership Interest ir	the Generation	System
🔲 Owner	Co-Owner	Lease	Other:

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4. Primary Intent of the Generation	ion System
Onsite Use of Power	Net Energy Billing
5. Electricity Use Production and	d Purchase

(a) Anticipated annual electricity Consumption of the facility or Site:	(kWh) / yr
(b) Anticipated annual electricity production of the generation system:	(kWh) / yr
(c) Anticipated annual electricity purchase (i.e. (a) minus (b)	(kWh) / yr

• Value will be negative if there are net sales to the DISCO.

6. Installing Contractor Information on (If Applicable)

Contractor's Last name First name

Name of Firm

Contractor's Phone Number

E-mail Address

Mailing Address

7. Requested In-Service Date

8. Provide One-Line Schematic Diagram of the Syst	em
Schematic is Attached	Number of Pages

9. Generator / Inverter Information	
Manufacturer	Model No.

Version No.	Serial No.

Generation Type (Check One)	Generation Type (Check One)	
Single Phae Three Phase	Inverter Other	
Name of Plate AC Ratings (Check One)		
kW	kVA	Volts
Primary Energy Source		
Note: If there is more than one inverters, attach an additional	sheet describing each.	

10. Site Plan Showing Location of the External Disconnect Switch (Attach additional sheets as needed)

11. Other Comments Specification and Exceptions (attach additional sheets if needed)

12. Application and Installer Signature
To the best of my knowledge, all the information provided in this application form is completed and correct.

Applicant Signature	Date
Installer Signature (If Applicable)	Date
Installer Signature (If Applicable)	Date
Installer Signature (If Applicable)	Date