

BOROUGH OF PERKASIE

620 W. Chestnut Street PO Box 96 Perkasie, Pa. 18944-0096 (215) 257-5065 Fax (215) 257-6875

INTERCONNECTION APPLICATION FOR CUSTOMER GENERATION PART 2

With Terms and Conditions for Interconnection

(Final Agreement - to be filled out prior to installation)

Certificate of Completion

CUSTOMER GENERATOR CONTACT INFORMATION

(Attach additional sheets as necessary in the event of multiple units of various types/sizes)

Legal Name and Mailing Address of Cus	stomer-Generator:			
Name:				
Mailing Address:				
City:				
Contact Person (If other than above):				
Mailing Address (If other than above):				
Telephone (Daytime):	(Evening):	(Evening):		
Facsimile Number:	E-Mail Address:			
The Customer-Generator Facility's I	nformation:			
Facility Address:				
City:	State: Zi	p Code:		
Electric Distribution Company:Perkasia	e Borough Electric Departme	<u>nt</u>		
Current Account #:	Current Meter #:	Current Meter #:		
Inverter Type:	Energy Source (circle	one):Wind	Photovoltaic	
Manufacturer:	Number of Units:			
Model Number of Inverter:		Inverter Rating:	KWao	

Equipment Installation Contractor: (Indicate by owner if applicable) Mailing Address: ____ City: State: Zip Code: Contact Person (<u>If other than above</u>): Telephone (Daytime): _____ (Evening): _____ Facsimile Number: _____ E-Mail Address: _____ The undersigned asserts that the Equipment has been installed in accordance with Part1 of the Interconnection Application as well as all applicable codes and regulations. Signed: ______ Date: _____ Printed Name: _____ Title: ____ Electrical Contractor: (If different from Equipment Installation Contractor) Mailing Address: City: _____ State: ____ Zip Code: ____ Contact Person (<u>If other than above</u>): Telephone (Daytime): _____ (Evening): _____ Facsimile Number: E-Mail Address: The undersigned asserts that the Equipment has been installed in accordance with Part1 of the Interconnection Application as well as all applicable codes and regulations. Signed: _____ Date: ____ Printed Name: _____ Title: ____ **Electrical Inspection:** The system has been installed and inspected in compliance with the provisions of the National Electrical Code and other applicable codes and standards as well as the local Building/Electrical Code of Perkasie Borough.

By: ______ Date: ____

Customer-Generator Signature:

¹ Completion of local inspections may be designated on inspection forms used by local inspecting authorities.

² As a condition of interconnected operation, you are required to send/fax/e-mail a completed signed copy of this Certificate of Completion to The Borough of Perkasie.