

WASCO ELECTRIC COOPERATIVE, INC

NET- METERING AND INTERCONNECTION APPLICATION

Section 1. Customer Information

Name _____

Mailing Address _____

Project Address
(If different than above) _____

Daytime Phone _____ Evening Phone _____

Utility Customer Account Number (from utility bill): _____

Section 2. Net-metering Facility Information

System Type (Check Box): Solar Wind Fuel Cell Hydroelectric
Application Type: Residential Commercial
 Single Phase Three Phase

Generator Size (kW) _____

Will project be inverter-controlled, induction or synchronous generation? _____

Inverter Manufacturer _____ Inverter Model _____

Inverter Serial Number _____ Inverter Power Rating _____

Meets IEEE Standards 929, 1547 and UL Subject 1741 requirements? _____

Disconnect Location (*if required*) _____

Section 3. Installation Information

Licensed Electrician _____ OR Contractor # _____

Mailing Address _____

Daytime Phone _____ Installation Date _____

Section 4. Certification(s)

1. (If an inverter is used) The net metering facility's inverter meets the requirements of IEEE 929-2000, "Recommended Practice for Utility Interface of Photovoltaic (PV) Systems" and Underwriters Laboratories (UL) Subject 1741, "Standard for Static Inverters and Charge Controllers for Use in Photovoltaic Power Systems"; and the National Electric Code (NEC), Article 690 and 705.

Signed (Equipment Vendor) _____ **Date** _____

Vendor Name (Printed) _____

Vendor Company _____

Vendor Address _____

_____ State _____ Zip _____

Vendor Phone _____

I hereby certify that the information provided in this application is true. I will provide Wasco Electric Cooperative a copy of signed government electrical inspection approval documents when obtained.

Signed (Owner) _____ **Date** _____

Net metering facility as certified by customer is approved by:

Signed: _____

Title: _____

Date: _____