Signature with Name:

Address:

Net Metering/ Bi-directional Metering Connection Application

То

Date:

The Section Officer/Designated Officer

Distribution Licensee.....

[Name of office.....]

I / we herewith apply for a solar energy net-metering/ bi-directional metering connection at the service connection for the Rooftop Solar PV Project of which details are given below;					
1	Name of applicant				
2	Address of applicant				
3	Service connection number				
4	Telephone number(s)				
5	Email ID				
6	Rooftop Solar PV Project capacity (Watts)				
7	Solar PV Project inverter make and type				
8	Solar PV Project inverter has automatic isolation protection (Y/N)?				
9	Has a Solar Generation Meter been installed(Y/N)?				
10	Expected date of commissioning of solar PV Project				
11	Concerned safety requirement fulfilled (Y/N)				

DECLARATION

I do hereby declare that the information furnished above is true to my knowledge andbelief.