

PV

1.(a) Full name of Applicant

Surname

(b) I. D. Card No./Company Reg. No.

Name

(c) Telephone/Fax No.

(d) Address where PV unit is installed

No. or name of site

Street

Locality

Postal code

2. Indicate here name and address of person who will provide access on request

Name and surname

No. or name of site

Street

Locality

Postal code

3.(a) Purpose for which premises are used Domestic Commercial and others Industrial

(b) Nature of business

4. Meter No. /Account No.

5. I hereby declares that the above information is correct and that I abide by the Electricity Supply Regulations. I also agree that Enemalta will credit electricity exported to the network to my account/s at the rate established for P.V. generation from time to time. I also understand that this is a temporary arrangement and may be changed in future subject to authorisation by MRA.

Service fee Single phase 40 Amps LM 20 / € 46.59

Three phase 60 Amps LM 45 / € 104.82

Applicant's signature _____

Date
D D M M Y Y

Technical information

This technical information is to be filled in by the Warranted Engineer responsible for carrying out works and installation.

6. **PV Unit:**
Peak Power kWp
Peak Power per phase:
Phase 1 kWp **Phase 2** kWp **Phase 3** kWp

7. **Inverter:**
O/P Voltage V_{ac} ± % **Max o/p current** A_{ac}
Frequency ± 0, Hz **Power factor** 0,
Harmonics % RMS: THD % **3rd H** % **5th H** %.
Islanding Protection:
Frequency _____
Impedance _____
Other _____

8. **Circuit protection:**
Settings
Over Current Amps; **Earth Fault** mAmps
Over Voltage Volts; **Under Voltage** Volts

9. **Earthing arrangement**
Earth electrode
Earth mat
Earth electrode/mat resistance ohms.

10. I, being the competent person responsible for the carrying out works and installation, of the PV unit at 1 (d) shown schematically on endorsed drawings no/s _____ attached, I hereby CERTIFY that the work for which I have been responsible is to the best of my knowledge and belief in accordance with Engineering practice to ensure correct operation of the PV unit and its connection to the Grid and that the results are satisfactory as detailed in Sections 6 to 9 above.

Name and postal address of person carrying out inspection and testing
 Name and surname
 No. or house name
 Street
 Locality Postal code
 Telephone/Mobilephone no.
 Warrant no.
 Signature of person carrying out inspection and testing _____ Date
D D M M Y Y

11. Please insert here

Electrical layouts and schematic diagram of installation
endorsed by the warranted engineer 10 above.

Physical layout.

MRA Notification/ Authorisation

FOR OFFICE USE

12.

Service fee paid LM / €

Cheque No.

Receipt No.

Name/Stamp of receiving officer
at Consumers Desk

Signature of receiving officer
at Consumers Desk _____

Date

D D

M M

Y Y

13. TO BE FILLED IN BY METER SECTION

13 A. Old meter information

| | | | | | |
|-----------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| Meter no. | <input type="text"/> | Reading | <input type="text"/> | Fuse rating | <input type="text"/> |
| Make and Type | <input type="text"/> | Amps | <input type="text"/> | Voltage | <input type="text"/> |
| Red seals no. | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Blue seals no. | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Brown seals no. | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

13 B. New Import/Export meter information

| | | | | | |
|----------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| Meter No. | <input type="text"/> | Reading | <input type="text"/> | Fuse rating | <input type="text"/> |
| Make and Type | <input type="text"/> | Amps | <input type="text"/> | Voltage | <input type="text"/> |
| Red seals no. | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Blue seals no. | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

13 C. New Generator meter information

| | | | | | |
|----------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| Meter No. | <input type="text"/> | Reading | <input type="text"/> | Fuse rating | <input type="text"/> |
| Make and Type | <input type="text"/> | Amps | <input type="text"/> | Voltage | <input type="text"/> |
| Red seals no. | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Blue seals no. | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

13 D. I declare that the information in sections 3,4 and above is correct.

| | | | | |
|--|----------------------|------|----------------------|----------------------|
| Name of tradesman carrying out work | <input type="text"/> | | | |
| Signature of tradesman carrying out work | _____ | Date | <input type="text"/> | <input type="text"/> |
| | | | D D | M M |
| Signature of PDTO/SDTO | _____ | | <input type="text"/> | <input type="text"/> |
| | | | D D | M M |
| | | | <input type="text"/> | <input type="text"/> |
| | | | Y Y | Y Y |

14. To be filled in by applicant or his representative after work has been completed.

I declare that Enemalta's apparatus was correctly and satisfactory installed .

Rate the level of service provided 1 2 3 4 5 1 = very poor 5 =very good

| | | | | | | |
|------------------|--------|----------------------|------|----------------------|----------------------|----------------------|
| _____ | ID No. | <input type="text"/> | Date | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <i>Signature</i> | | | | D D | M M | Y Y |