

Application for Customer-Owned Generating System License

Appendix A- Customer-Owned Electric Generating Systems License

A.	Application Information							
	Name		Utility Ac	Utility Account #				
	Billing Address							
	City							
	Install Address [If different fr	om above]						
	City State	Zip Code		-				
	Daytime Phone		Evening Phone					
	Email Address							
В.	Generation/Project Syste	m Informatio	n					
	1. Type of System	Solar PV Array	Fuel Cell	Wind	Hydroelectric			
	2. Project Description							
	Manufacturer							
	Nameplate Data							
	Voltage & Frequency							
	3. Type Synchronous Inve	Induction Generator						
	Manufacturer Name and Model No:							
	Serial Number		Power Rating					
	Location Indoor Outdoor Loc	Nameplate						
	Data	Voltage & Frequency			Operation			
	Power Factor							



4. Site Location of System on Property: Please attach a site plan for the install location.

c.	Generation System Designer and Installation Contractor Information [if applicable]					
	1. Design Consultant					
	Address					
	City	State	Zip (Code		
	Phone	_ Fax				
	2. Installation Contractor	Contractor License No				
	Address					
	City					
	Phone	_ Fax				
D. I	nstallation					
	Proposed Start of Installation Date					
	Proposed Completion Date					
	2. Applicant to submit with this form a one-line electrical diagram for proposed generation and					
	electrical system, including metering points in relation to Springville City Power's electrical system					
	and the customer's generating system location.					
	3. Applicant to submit with this form a written description of the protection device schemes as					
	described in the Customer-Owned Generating Standards.					
E. F	- Fee					
	Applicant to submit a non-refundable fee to Sp	oringville Cit	y for the re	view and processing of the		

I agree to comply with all city, state and federal electrical laws, ordinances and codes. The representations in this Customer-Owned Generating License Application are true and accurate. Any misrepresentation or errors herein, are the sole responsibility of the applicant, and shall in no way

license application as shown in the Springville City Comprehensive Fee Schedule.



incur or accrue liability or obligation to the jurisdiction, its enforcing officers or agents, and may result in the termination of any License granted hereunder.

A final inspection ar	nd approval is requi	ired before the sv	stem will be connected
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Applicant Signature _	
DATE	
Applicant Name	