## EASTERN POWERDISTRIBUTIONCOMPANYOFA.P.LIMITED

# Application Form for solar grid interactive roof-top and small SPV power plants forNet/Gross metering

(in termsofG.O.Ms.No. 8Dt:12.02.2015read)

Photo of the
-Applicant/
Officebearer
of Group/
Society

For Office Use:	area and a second
Reg. No.:	Date :
Mode of Payment:	
Online/Cash	
Transaction No.:	
Amount:	- Date :

1	Name of the applicant*		
2	Applicant full Address for	H. No & Street	
	correspondence*	Village& Mandal	
		District& PIN Code	
3	Phone/MobileNo.*		
4	EmailID		
5	Identification Proof Details*	Aadhar No:	
		PAN/Voter ID/DL:	
6	Address of the site for	H. No &Street	
	Installation*	Village &Mandal	
		District& PIN Code	
7	Service Connection No*		
8	Proposed SPV PlantCapacity(KWp)*		
9	Option for net metering / gross metering*		
10	Consumer Bank Details	A/c No.	
	(Kindly enclose cancelled	Bank& Branch	
	cheque)	IFSC Code	
11	the state of the s		
12	In case of Group/ Societies, kindly provide details in Annexure-1 (Share of capacity		

### Declaration for Individuals & Office Bearer/ Lead member of Group/Society

I here by declare that the information furnished above is true to the best of my knowledge and belief. If found false, APEPDCL has the right to reject / cancel the application .Further,I here by agree with the specifications, terms and conditions stipulated by APEPDCL for the selection and installation of roof-top solar power plant and I have gone through the Guidelines of Solar rooftop policy.

Place:	Signature:
Date:	Name :

#### CHECKLIST:

- 1.Copy of electricity bill (YES/NO)
- 2. Blank cancelled cheque (YES/NO)
- Annexure-1 (In case of Group/ Societies) (YES/NO)
- 4. ID Proof Copy (YES/NO)

Annexure-1

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#### Declaration for Groups/Societies

We here by declare that the information furnished above is true to the best of my knowledge and belief. If found false, APEPDCL has the right to reject / cancel the application. Further, I here by agree with the specifications, terms and conditions stipulated by APEPDCL for the selection and installation of roof-top solar power plant and I have gone through the Guidelines of Solar rooftop policy.

Piace:		Date.		
Sl.No	Consumer Name	Installation Capacity share (%)	Consumer Servicenumber	Signature foconsent

Date

#### CHECKLIST:

- 1. Copy of Electricitybill (s) (YES/NO)
- 2. Blank cancelled cheque (YES/NO)
- Annexure-1 (In case of Group/ Societies) (YES/NO)