# CAGAYAN II ELECTRIC COOPERATIVE, INC.

Macanaya District, Aparri, Cagayan
Hotline No. (078) 888-2173
Email:cagelco2official@gmail.com
Website: www.cagelco2.org.ph

## NET-METERING APPLICATION FORM

Control No:

| CUSTOMER INFORMATION | INSTALLER INFORMATION (Technician) |
|---|---|
| ☐ New Customer ☐ Existing Customer | Company/Agency |
| *Account Number *(for existing Customer)* : | |
| Family Name / Given Name / Middle Name | Family Name / Given Name / Middle Name |
| | |
| Address (Where the RE System is installed) | Address |
| | |
| Contact Number | Contact Number |
| | |

### TECHNICAL SPECIFICATIONS

Information of the power generating facility:

1. Fuel Source Type: Solar
2. Inverter Configuration Type: _____ (Grid-Tied/Hybrid) System
3. Total Capacity Output: _____ Watts peak
4. Voltage Output per Module _____ Volts DC
5. Inverter Type _____ (Micro Inverter/Central Inverter)
6. Voltage Rating _____ Volts AC

_____
**SIGNATURE OVER PRINTED NAME OF TECHNICIAN**

_____
**DATE**

### REQUIREMENTS

- ☐ Letter of Intent for Net Metering Interconnection
- ☐ Qualified End-users Certificate of Compliance (QE-COC) Application Form No. 1 at QE-COC Application Form 1.1 (Solar) (from CAGELCO2)
- ☐ Electrical Plan and/or Electrical Layout with Renewable Energy (RE) System *(Duly signed and sealed by a Professional Electrical Engineer (PEE))*
- ☐ Certificate of Final Electrical Inspection (CFEI) *(from the LGU Building Official)*
- ☐ Photocopy of Valid Identification Card (ID) of the Customer
- ☐ Technical Specifications of Plant Facilities (e.g. PV Panel, Inverter, Battery)
- ☐ Business Permits/DTI/SEC/BIR Registrations of Solar Installer, if any
- ☐ Photo of Solar Set-up *(if installed)*
- ☐ Special Power of Attorney (SPA) if representing individual or Secretary Certificate if representing a company

### ATTACHMENTS

- ☐ Net-Metering Agreement *(upon approval)*
- ☐ Distribution Impact/Asset Study (DIS/DAS) *(from CAGELCO II Technical Services Department)*
- ☐ Certificate of Compliance (COC) from the Energy Regulatory Commision *(after execution)*

**I HEREBY CERTIFY that the information provided in this form is complete, true and correct to the best of my knowledge.**

_____
**SIGNATURE OVER PRINTED NAME OF CUSTOMER**

_____
**DATE**

### SUMMARY OF CHARGES

Materials _____
ERC Fee _____
VAT _____
**TOTAL** _____
**OR NUMBER** _____
**OR DATE** _____

*Please submit this Application Form in two (2) Copies together with other requirements in a white long folder.*