

SELF-CONSUMPTION SOLAR PV SYSTEM REGISTRATION FORM

PART 1: INFORMATION		
Please submit the registration form to the Distribution Licensee before commissioning the solar PV system installation.	For office use only:	
	Reference No:	
Consumer shall comply with "Guideline on the Connection of Solar Photovoltaic Installation for Self-Consumption".	Serial No:	
Consumer need to conduct PSS for solar PV system with capacity ≥425kW.	Date Received:	
 Applicant need to apply for a generating license from Energy Commission for a single phase system with capacity ≥ 24kW or single phase system with capacity ≥ 72kW. 	Time Received:	
	Receiving Officer:	
PART 2: CONSUMER INFORMATION		
Applicant Name:		
Electricity Bill account number:	IC/ROC Number:	
Distribution Licensee Company:	(e.g. TNB, SESB, etc.)	
Email Address:	Phone Number:	
Mailing Address:		
I hereby authorize the Competent Person as described in PART 4 to act on my behalf to manage my Self Consumption (SelCo) registration		
Signature: Date:		
PART 3: ALTERNATIVE CONTACT PERSON		
Name:		
Relationship:		
Email Address:	Phone Number:	
Mailing Address:	Thone Number:	
PART 4: COMPETENT PERSON (ELECTRICAL CONTRACTOR) DETAILS		
PART 4: COMPETENT PERSON (ELECTRICAL CONTRACTOR) DETAILS Name: IC/ Ce		
Name: IC/ Ce		
Name: IC/ Ce Company Name: Comp	tification No. :	
Name: IC/ Ce Company Name: Comp Phone Number: E-ma	tification No. :any ROC No. :	
Name: IC/ Ce Company Name: Comp	tification No. :any ROC No. :	



PART 5: SERVICE PROVIDER DET	AILS (IF ANY)		
Name:		IC/ Certification No. :	
Company Name:		Company ROC No. :	
Phone Number:		E-mail address:	
Mailing Address:			
PART 6: CONSUMER INFORMAT	ION		
Installation Address:			
Installation Site Ownership:	Fully Owned	Owned (charged to bank)	Leased
If not fully owned, please provide	e the owner's name:		
Is the applicant an existing FIAH / NEM?	: Yes No	If yes, please provide the existing solar capacity installed(kW)	
Voltage at point of common coupling: Low Voltage (230V/400V) Medium Voltage (11kV/33kV) @Utility meter			
Reasons for installing solar PV system	Reduce electricity bill	Peak Shaving	
	Reduce Green House	effect Other reasons:	
	Farm	Roof (Domestic)	
	Roof (Commercial)	Garage	
	Others:		
PART 7: TECHNICAL INFORMATION	ON		
a) Maximum demand of existing	installation	kW	
b) Installed Solar PV Capacity	in kW _p c) in kW _{ac}	
d) Expected generation per mont	thkWh		
e) Date of Commissioning of sola	r system:	(dd/mm/yyyy)	
f) Installation of Battery Energy S	torage System: Yes	No If yes, Battery capacity	kW
		Battery Manufacturer:	
g) Daytime Peak Demand (11am to 3pm)kW (Friday to Monday)			
h) Daytime Lowest DemandkW			
Note: For stand alone system, no capacity limit for solar PV system installation. For non stand alone system, solar PV system installed capacity shall not be more than 75% of maximum demand.			



PART 8: PHOTOVOLTAIC (PV) INSTALLATION INFORMATION		
a) PV Module	: i) Type: Monocrystalline Polycrystalline Thin Film Others: : ii) Manufacturer : iii) Module capacity	
b) PV Inverter	i) Number of inverter installed ii) Inverter capacity iii) Type: Single Phase Three Phase iv) Manufacturer v) Power Factor: lagging leading unity	
PART 7: DECLARA	ATION	
 By signing this form, I declare that: I am representing the applicant of the premise and the information furnished above is true to my knowledge and belief. I hereby acknowledge that all information given are true and the relevant Authority shall have the right to take any action if the above information is false. I confirm that the solar PV system design comply to the standards (IEEE 1547, IEC 61727, MS 1837, Guidelines on the Connection of Solar Photovoltaic Installation for Self-Consumption) and the inverter (s) used are as per approved lists. I also verify that the site condition is fit for installation of the solar PV system as per applicable regulations. I further agree to comply with the specifications, terms and conditions stipulated in the applicable guidelines and related regulations, as amended from time to time. 		
Signature:	Competent Person stamp:	