

**RENEWABLE ENERGY APPLICATION
CUSTOMERS UNDER NRS 704.766 – 704.775
(NET METERING)**

APPLICANT'S FIRST NAME

LAST NAME

TELEPHONE NUMBER

EMAIL ADDRESS

STREET ADDRESS

CITY STATE ZIP

TYPE OF SYSTEM: SOLAR ELECTRIC SOLAR THERMAL WIND
 OTHER: _____ (EXPLAIN)

IF SOLAR ELECTRIC, NUMBER OF PANELS: _____

IF SOLAR WATER HEATING SYSTEM:

SIZE OF EACH PANEL: _____

THERMAL ENERGY METER (YES/NO)? _____

PERCENT OF FOSSIL FUEL USED (IF APPLICABLE): _____
_____ %

ESTIMATED ANNUAL ENERGY USAGE (IN KWH) _____

STAFF USE ONLY

DATE OF ONSITE INSPECTION: _____

LONG: D _____ M _____ TENTHS _____

ANNUAL PERFORMANCE ESTIMATES FROM SRCC?

AC RATING (KW): _____

ARRAY TILT: FIXED 1-AXIS 2-AXIS

SRCC SYSTEM NAME: _____

ARRAY TILT (DEGREES, FOR FIXED): _____

SRCC SYSTEM NUMBER: _____

INTERCONNECTED UTILITY: _____

SRCC SYSTEM MODEL: _____

FTL (°F): _____

DATE IN SERVICE: _____

DISTRIBUTION CIRCUIT: _____ VOLTAGE (KV): _____

LOCATION AND TYPE OF METERING: _____

ARRAY AZIMUTH (DEGREES):

INVERTER: _____
MANUFACTURER, MODEL, AC RATING, OUTPUT

CALCULATED ANNUAL ENERGY PRODUCTION:

RATED DC CAPACITY: _____

GPS COORDINATES:

LAT: D _____ M _____ TENTHS _____

CUSTOMER CLASS: _____

