

**Applicant Information** 

## Small Generator Facility Interconnection Certificate of Completion Form<sup>1</sup>

Name:			
Mailing Address:			
		Zip Code:	
Telephone (Daytime):	(Evening):		
E-Mail Address/ Fax number:			
<u>Installer</u>		Check if owner-installed	
Name:			
City:	State:	Zip Code:	
Telephone (Daytime):	(Evening):		
E-Mail Address/ Fax number:			
Final Electric Inspection and	d Applicant Signature		
Generator Facility is not ready by the-Public Utility as provide Applicant Signature:	/ for operation until receiped below.	ner acknowledges that the Sma of of the final acceptance an approve	al
Printed Name: Check if copy of signed electr			
Acceptance and Final Appro	oval of interconnection	installation(for Public Utility use	only)
	d conditions of the PUC r	Small Generator Facility is approv rules found in OAR 860, Division 08 t:	
Public Utility waives Witness If not waived, date of success	Test? <i>(Initial)</i> Yes ( ful Witness Test:	_) No () Passed: (Initial) ()	
Public Utility Signature:		Date:	
Printed Name:		Title:	

<sup>&</sup>lt;sup>1</sup> The interconnection shall not be deemed complete and ready for operation until the Applicant has complete this form, secured the necessary attachments and signatures and returned a copy to the Public Utility at the Public Utility's designated address.