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| **Form A: Application for connection of multiple Micro-Generating installations** | | | | | | |
| To ABC electricity distribution DNO  99 West St, Imaginary Town, ZZ99 9AA abced@wxyz.com | | | | | | |
| **Developer/Customer Details:** | | | | | | |
| Developer **/ Customer** (name) |  | | | | | |
| Address |  | | | | | |
| Post Code |  | | | | | |
| Contact person (if different from **Customer**) |  | | | | | |
| Telephone number |  | | | | | |
| E-mail address |  | | | | | |
| **Installer Details:** | | | | | | |
| **Installer** |  | | | | | |
| Accreditation / Qualification |  | | | | | |
| Address |  | | | | | |
| Post Code |  | | | | | |
| Contact person |  | | | | | |
| Telephone Number |  | | | | | |
| E-mail address |  | | | | | |
| **Proposed Micro-generator Details:** | | | | | | |
| Address | Post Code | MPAN | **Micro-generator** **Registered Capacity** in kW at 230 V AC | | | **Manufacturer‘s** Ref No (this number should be registered on the ENA **Type Test Verification Report** Register as Product ID) |
| PH1 | PH2 | PH3 |
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| Use continuation sheet where more than 10 **Micro-generator**s are to be installed.  Please include an electronic map with the location of each Customer Installation highlighted in red.  Record **Micro-generator** **Registered Capacity** in kW at 230 V AC, to one decimal place, under PH1 for single phase supplies and under the relevant phase for two and three phase supplies. For example 2.8 kW.  Detail on a separate sheet if there are any proposals to limit export to a lower figure than that of the **Micro-generator.** | | | | | | |