

HLPD DISTRIBUTED GENERATION AUTHORIZATION

HUDSON LIGHT & POWER DEPARTMENT
49 FOREST AVENUE, HUDSON MA 01749
PH: 978-568-8736 FAX: 978-562-1389
WWW.HUDSONLIGHT.COM

HLPD DG#: _____

DATE: _____

OWNER INFORMATION:

NAME: _____
EMAIL: _____
HLPD ACCOUNT #: _____
ADDRESS: _____
PHONE: _____

PROJECT INFORMATION:

PROJECT ADDRESS: _____

DESCRIPTION OF SYSTEM: _____

PROJECTED COMMISSION DATE: _____

NOTICE: ALL EQUIPMENT SPECIFICATIONS MUST BE SUBMITTED TO HLPD ENGINEERING PRIOR TO PROJECT COMMISSIONING.

SERVICE AT PROJECT	PICK ONE		
1-PHASE 3-WIRE 120/240V			
3-PHASE 4-WIRE 120/208V			
3-PHASE 4-WIRE 277/480V			
3-PHASE 3-WIRE 240V (FOUR WIRES MUST BE INSTALLED)			
3-PHASE 3-WIRE 480V (FOUR WIRES MUST BE INSTALLED)			
CIRCLE ALL THAT APPLY BELOW:			
CUSTOMER TYPE:	Residential	Commercial	Industrial
PROJECT TYPE:	Wind	Solar / Photovoltaic	Other
PRIMARY METERING:	Yes	No	
SYSTEM KVA:			
CONFORMS WITH IEEE 929-2000:	Yes	No	
AC DISCONNECT CONFORMS W/ UL 1741:	Yes	No	

INSTALLER INFORMATION:

NAME: _____
ADDRESS: _____
PHONE: _____ FAX: _____

NOTE: BY SIGNING BELOW, OWNER ACKNOWLEDGES THAT HE/SHE HAS RECEIVED AND WILL ABIDE BY ALL HLPD DISTRIBUTED GENERATION REQUIREMENTS. HLPD SHALL NOT BE RESPONSIBLE FOR WIRING AND/OR INSTALLATION MISTAKES.

HLPD APPROVED INSTALLATION DATE : _____

(TO BE COMPLETED BY HLPD REP)

SIGNATURES:

(PROPERTY OWNER)

(HUDSON LIGHT & POWER DEPARTMENT REP)