

Distributed Generation Final Application Form > 10kW



**Eastland
Network**

172 Carnarvon Street
PO Box 1048
Gisborne 4040

Tel 06 869 0700
Fax 06 867 8563
info@eastland.nz

eastland.nz

Note: This is **not** an application for electricity.
Allow five working days (from receipt of the completed form by Eastland Network) for processing for a standard application. Applications are valid for a period of six months from the date of approval.

	AFS Reference
	File Reference

Applicant Contact Details

Surname			
First name			
Business name			
Phone (H)			
Phone (W)			
Fax			
Email			
House No.		or Rapid No.	
Address			
Suburb			
City/Town			
Post-code			
AFS no. of initial application			

Please attach confirmation that our requirements will be met (Attach supporting documentation as necessary).

- Safety Requirements
- Technical Requirements
- Operational Requirements
- Commercial Requirements

Confirmation that external regulatory requirements such as resource, planning or building consents will be met (Attach supporting documentation as necessary).

- Evidence showing external regulatory requirements have been met

Grid Operator Requirements.

- Evidence showing grid operator requirements have been met

A certificate of Compliance certifying that the generation installation is electrically safe. This certificate must be signed off by both the electrical worker who installed the generation and a person who is a registered electrical inspector under part 9 of the Electricity Act 1992 **and** who is competent with distributed generation.

- Attached completed Certificate of Compliance

Details of energy retailer who will buy the energy generated.

Company: _____

- Attached copy of energy purchase agreement

Details of electrical worker who will connect the generation.

Person: _____

Registration: _____

Declaration

By submitting this inquiry I declare all of the above information and any attached information true and correct. I also acknowledge Eastland Network's full and unlimited right to disconnect our generation should any part of this application prove to be false or fraudulent.

Applicant signature	Date
	/ /

**Post the completed application form to PO Box 1048 Gisborne or deliver to 172 Carnarvon Street, Gisborne.
No Payment is required**