

## ANNEXURE-2

### Application Form for installation of Roof-top Solar PV System under Net Metering arrangement

Name of Distribution Licensee: Maharashtra State Electricity Distribution Co.Ltd  
(MSEDCL)

Name of Administrative Office:

Application No. : \_\_\_\_\_

Date of Receipt : \_\_\_\_\_

(To be filled by the Applicant in Block Letters)

1	Applicant's Full Name	:	
2	Address of the premises at which Roof-top Solar PV System is to be installed	:	
3	Telephone/Mobile No.	:	
4	E-mail ID (if available)	:	
5	Alternate Address for communication (if any)	:	
6	Category of existing electricity connection	:	
7	Consumer No.	:	
8	Sanctioned Load / Contract Demand (in kW /kVA/ HP)	:	
9	Voltage at which existing supply has been given (in volts)	:	
10	Proposed AC capacity of Roof-top Solar PV System to be installed (in kW)	:	
11	Voltage at the output of Solar inverter (in volts)	:	
12	Details of Registration Fee paid (For consumers with Sanctioned Load-upto 5 kW: Rs. 500;  For consumers with Sanctioned Load/Contract Demand above 5 kW: Rs.1,000).	:	

Date : \_\_\_\_\_

Signature of Applicant.

**List of documents attached with Application Form:**

1. Copy of the latest paid electricity bill.
  2. General Power of Attorney in favour of signatory in case of Partnership Firms; certified true copy of the Resolution, authorizing the signatory to deal with the concerned Distribution Licensee, passed by the Board of Directors in case of Companies (as applicable).
  3. Technical details of PV modules, Inverter and other equipment of system proposed to be installed.
  4. Proof of payment of Registration Fee.
- .....

**ACKNOWLEDGEMENT**

Received an Application from ..... for connectivity/installation of Roof-top Solar PV System of capacity of ..... kW as per details below :—

Date of Receipt	Applicant's Name	Application Number	Existing Consumer No.	Capacity of Roof-top Solar PV System
(1)	(2)	(3)	(4)	(5)

Date :

(Signature and Designation of Authorized Officer)