

REGISTRATION FORM SELF GENERATORS

THIS FORM HAS TWO PARTS - PART A and PART B

PART A

Please provide the information requested in **Attachment A** for each generating facility. If more room is needed to list all generating facilities, attach additional copies of Attachment A or lengthen the table electronically.

1. Legal name of the Registering Party.

Fine Foods Inc.

2. Registering Party's Dominica postal address

*Jimmit
Box 40
Roseau*

3. Registering Party's Street address (if different from postal address)

4. Name, title, address, telephone number, fax number, and e-mail address of the person to whom communications relating to the self-generator should be addressed.

<i>EMS Ltd. Canfield Box 40 Roseau 2556813</i>	<i>Felix A. Julien Energy Engineer/Manager EMS Ltd. 612 5468 255 6813</i>
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5. Address/location where generator is installed

Subway Restaurant
Ross University Compound
Picard.

PART B

1. Is the generation equipment you own and/or operate/used as your main source of electricity or for stand-by purposes only?

Main Source () Standby Purposes Only

2. How/where is the generator housed?

Roof Mounted on Building

3. How/where is fuel stored?

NA

4. Volume of fuel storage?

NA

5. How is the lubricating oil used in the generator disposed of?

NA

6. What kind of emission control device does the installation have?

NA

**FORM FOR REGISTRATION OF SELF GENERATORS
ATTACHMENT A** (Sheet ___ of ___)

	Manufacturer	Date installed dd/mm/yyyy	Output Voltage	Fuel type	Capacity rating (KVA)	Single or 3 phase	Frequency (50 or 60)	Est. Cost/ kWh (EC\$)	kWh generated /mth	Avg fuel consumption /mth	Avg oper. hrs/mth
1	D#00 SAMIC	1st April 2015 proposed	400/ 230 V	Solar	60	3	50	0.38	8438		6
2											
3											
4											
5											
6											
7											

N.B. If more room is needed to list all generating facilities, attach additional copies of Attachment A or lengthen the form electronically.


7. What kind of noise control device does the installation have?

NA

8. (For businesses) Do you have an environmental management plan? NA
(If yes), please attach a copy.

9. Is the installation certified by the Government Electrical Inspector? _____
(Attach copy of certificate)

I hereby represent that the information contained on this registration form is true and accurate to the best of my knowledge and belief.

Signature:  _____

Date: 20th January 2015

Name (please print): Felix A. Julien

Company: EMS Ltd.

Post /Email or hand-deliver this form to:
Executive Director
INDEPENDENT REGULATORY COMMISSION
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Roseau, Commonwealth of Dominica
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