

REGISTRATION FORM SELF GENERATORS

Regulating Electricity, Promoting Our Energy

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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.

Gentle Rest Funeral Services

2. Registering Party's Dominica postal address

E.O. Leblanc Highway, P.o. Box 2341 St. Joseph, Dominica

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.

Edmund Robinson Reliant Solutions 66 Potters St P.o. Box 2341 Pottersville Dominica

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5. Address/location where generator is installed

Gentle Rest Funeral Services E.O. Leblanc Highway, P.o. Box 2341 St. Joseph, Dominica

PART B

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- 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?

Self Enclosed at the Rear of Building

3. How/where is fuel stored?

Self Contained with Future plan for external tank

4. Volume of fuel storage?

16.4 US gal

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

Not installed

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

Exhaust

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

Sound Attenuation Enclosure

- 8. (For businesses) Do you have an environmental management plan? No (If yes), please attach a copy.
- 9. Is the installation certified by the Government Electrical Inspector? <u>Not Yet Installed</u> (Attach copy of certificate)
- 10. Will the generator be connected to the National Grid? (V) Yes

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

Signature: Camund Robinson

Date: 09/11/2015

Name (please print): ____Edmund Robinson

Company: ____Reliant Solutions

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Post /Email or hand-deliver this form to: Executive Director INDEPENDENT REGULATORY COMMISSION 42 Cork Street Roseau, Commonwealth of Dominica Tel: 440 6634 Fax: 440 6635 email: admin@ircdominica.org www.ircdominica.org

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COMMONWEALTH OF DOMINICA

FORIM FOR REGISTRATION OF SELF GENERATORS ATTACHMENT A (Sheet 1 of 1)

Independent Regulatory Commission Regulating Electricity, Promoting Our Energy

Manufacturer Date installed Output dd/mm/yyyy Voltage	FG Wilson NoV 2015 240V				
t Fuel type	Diesel				
Capacity rating (KVA)	8.8KVA				
	3 converted to single	2			
Single or 3 Frequency phase (50 or 60)	50hz				
Est. Cost/ kWh (EC\$)					
kWh generated /mth					
Avg fuel consumption /mth					
Avg oper. hrs/mth	u	þ			

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

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