



Schedule 5 Application for Generation Licence - Self Generators 20 kW and over

Section A - 1:

1. Name of Applicant: KALINAGO COUNCIL
() Individual () Company () Partnership

2. Postal Address: SALYBIA
KALINAGO TERRITORY
COM. OF DOMINICA

3. Street Address:

4. Telephone No: 445-7336 (m)

Fax No:

5. E Mail:

6. Address/location where Generator is installed:

~~ST. JAMES~~ GAULLETT RIVER
KALINAGO TERRITORY

Section A - 2

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

() Main Source

Standby Purposes Only

2. Please provide the following information about your generation equipment (attach additional pages if spaces provided below are not sufficient):

- a. Prime Mover INVERTER (6) g. Output Voltage 230V
b. Date of Installation 10-28-2015 h. Fuel Type SOLAR
c. Manufacturer FRONIUS i. Est. Cost/ kWh (EC\$) _____
125 kWh
d. Capacity Rating (KVA) 25 j. kWh Generated/Mth 10,000
e. ~~Single~~ Three Phase _____ k. Av. Fuel Cons/Mth (gals) ✓
f. Frequency (50 or 60 Hz) 50 Hz l. Av. Oper. Hrs./Mth 300

3. How/where is the generator housed? SOLAR FARM

4. How/where is fuel stored? N/A

5. Vol. of Fuel storage? N/A

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

N/A

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

NO EMISSION

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

9. (For businesses) Do you have an environmental management plan?
NO (If yes), please attach a copy.

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

11. Will the generator be connected to the National Grid? YES

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

Signature: Louis Hill Date: 10-27-2015

Name (please print): LOUIS PATRICK HILL

Company: KALINAGO COUNCIL

Post/Email or hand-deliver this application to:
Executive Director
INDEPENDENT REGULATORY COMMISSION
42- Cork Street
Roseau, Commonwealth of Dominica
Tel: 767 440 6634 Fax: 767 440 6635
Email: admin@ircdominca.org
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