Independent Regulatory Commission

Regulating Electricity, Promoting Our Energy

Application/Registration Form for Solar Generation

1. CONTACT AND LOCATION INFORMATION

SECTION A.

Main Applicant (*License is issued in this name, individual or organization*):

Name of Organization *(if applicable)*: *Ministry of Education, Human Resource, Planning, Vocational Training & National Excellence*

First Name: *Chandler* **Last Name:** *Hyacinth*

Address: *2nd Floor, Government Headquarters, Kennedy Avenue, Roseau, Dominica*

Telephone: *767-266-3256* **Mobile:** *767-611-3551* **Fax:** .....

Email address: *pseducation@dominica.gov.dm*

SECTION B.

Information for Location of Installation:

Name of Property Owner: *Morne Prosper Primary School*

Address: *Morne Prosper, Dominica*

Telephone: *767-285-5091* **Mobile:** *767-611-4222* **Fax:** .....

Email address: *pseducation@dominica.gov.dm*

Type of Location: Residential Commercial Industrial Government

2. SYSTEM DESCRIPTION

(a). Voltage Delivered: **1 Phase**: 230 V 120/240 V **3 Phase**: 400 V 11 kV

(b). Total Load to be Connected to System (kW): *4kW*

(c). Total PV (DC) Capacity (kWp) *5.25* **(d). Total Inverter (AC) Capacity (kW):** *4kW*

(e). PV Mounting Location: On Roof On Ground Other .....

(f). Type of Structure: House Apt. Building Office Building Educational
Health Care Industrial Other .....

(g). Describe Type of Roof (for roof mounted systems; sloped or flat, materials, etc.):
Flat Reinforced Concrete Slab Roof

(h). Will the solar PV system be connected to the National Grid? Yes No

(i). Electricity Generated by the Solar System will be used as:
Main Source Standby Supplement to utility usage Other .....

3. INVERTER INFORMATION

(a). Number of Inverters: 1 PV Inverter — 1 Battery Inverter

(b). Manufacturer: FRONIUS — VICTRON

(c). Model #s: FRONIUS PRIMO 4.0 — VICTRON MULTIPLUS II 48/5000

(d). AC Rating of Inverters: 4kW 180-270V/ 45 - 65Hz — 5kW 187-265V/ 45 - 65Hz

(e). Proposed Inverter Locations: INDOORS — INDOORS

(f). Certifications: EN-IEC 60335-1, EN-IEC 60335-2-29, EN-IEC 62109-1, EN-IEC 62109-2 — DIN V VDE 0126-1-1/A1, IEC 62109-1/-2, IEC 62116, IEC 61727,AS 4777-2, AS 4777-3, G83/2, G59/3, CEI 0-21, VDE AR N4105

4. PV MODULE INFORMATION

(a). Number of Modules: 14

(b). Manufacturer: LG

(c). Model #s: NeON 2

(d). Dimensions of each module: 1,740mm x 1,042mm x 40mm

(e). Module Power Rating (kWp): 380w

(f). Certifications: IEC 61215-1 / -1-1 / 2:2016, IEC 61730-1 / 2:2016, UL 61730-1:2017, UL 61730-2:2017 ISO 9001, ISO 14001 OHSAS 18001

5. STORAGE INFORMATION

(a). Does the system include storage? Yes No

(b). If Yes state the total capacity (Ah): 45.6kWh

(c). Battery Model #: PHI3.8 48V M

(d). Manufacturer: SIMPLIPHI POWER

(e). Battery Type (FLA, Li-ion, etc.): LITHIUM ION

(e). Total Voltage of Storage: 48V

(f). Expected Daily kWh usage from storage: 4.8 kWh

(g). Certifications: UL, CE, UN/DOT and RoHS compliant components - UL 1973, UL 1642

6. MOUNTING SYSTEM INFORMATION

(a). Describe Mounting System: Tilt Leg

(b). Manufacturer: IronRidge

(c). Model #: XR-100-168A

7. ITEMS TO SUBMIT

Please submit the following as part of your application where applicable:

ITEM (Please indicate with check mark that you have submitted)	Attached?
One-line diagram of the proposed solar system:	✓
Inverters Spec. Sheet:	✓
Solar Moules spec. sheet:	✓
Storage System spec. sheet (if applicable):	✓
Mounting System spec. sheet (if applicable):	✓

8. DECLARATIONS

I (we) hereby declare that I (we) own the property on which the solar system is to be installed or have the permission of the property owner to install the system on said property.

Applicant Signature: ..... **Date:** 29 June 2021

I Chandler Hyacinth hereby declare that the information contained in this application is true and accurate to the best of my knowledge.

Applicant Signature: ..... **Date:** 29 June 2021

Applicant Name (block letters) Chandler

Organization *(if applicable)*: Ministry of Education

Position in Organization *(if applicable)*: Permanent Secretary

Ministry of Education, Human Resource Planning, Vocational Training & National Excellence
30 JUN 2021
COMMONWEALTH OF DOMINICA

If application is prepared by someone other than the main applicant please provide details below:

Name (block letters): .....

Address: .....

Tel. #: .....

Signature ..... **Date:** .....