

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): Rodney's Wollness Ketreat	
irst Name: Last Name: Last Name: Address: PO: Box 417, Kanawa, Brooklyn, Soufriere, Com/wealth & Dominic elephone: 17674408222 Mobile: 6133417 Fax: mail address: Relax Brogneys wollness.com	્ભ
ECTION B.	
nformation for Location of Installation:	
Jame of Property Owner: Rodney'S Wellness Retreat 1-7 Address: SqMe as above Telephone Same as above Fax: Imail address: Same as above Type of Location: Residential D Commercial D Industrial D Government D	
2. SYSTEM DESCRIPTION	
a). Voltage Delivered: 1 Phase: 230 VV 120/240 V 3 Phase: 400 V 11 kV 1 b). Total Load to be Connected to System (kW): c). Total PV (DC) Capacity (kWp) 12kW (d). Total Inverter (AC) Capacity (kW): 14kW	
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.):	
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: (b). Manufacturer: (e). Proposed Inverter Locations: Reception (f). Certifications:

4. PV MODULE INFORMATION

(a). Number of Modules: (c). Model #s: 34to Paly (f). Certifications:

5. STORAGE INFORMATION

(a). Does the system include storage? Yes No 🗆
(b). If Yes state the total capacity (Ah): 856 (c). Battery Model #: Kolls Surrette S-SSO Flooded (d). Manufacturer: Rolls
(c). Battery Model #: Kous Surrette S-550 Mooded
(d). Manufacturer: KOUS
(e). Battery Type (FLA, Li-ion, etc.):
(e). Total Voltage of Storage: 40
(f). Expected Daily kWh usage from storage:
(g). Certifications:
6. MOUNTING SYSTEM INFORMATIC

Mount (a). Describe Mounting System:

(b). Manufacturer: _______



-7

7. ITEMIS 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:	Ø
Solar Moules spec. sheet:	
Storage System spec. sheet (if applicable):	Ø
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.

8# 2020 Applicant Signature: Date: 7-

Tin one () 550 hereby declare that the information contained in this application is true and accurate to the best of my knowledge.

Applicant Signature: IF RWR Date: 3/13/202x Applicant Name (block letters) Konney's Wollness Retreat
Applicant Signature:
Applicant Name (block letters) Konney's Wallness Ketvear
Organization (If applicable):
Position in Organization (If applicable):

	e other than the main applicant please provide details below:
Name (block letters): Technica	I Support Services del
Address: Lowlar Castle Con	nfort, Rospan, Dominica
Tel. #: 1767235 339	Tautinicai
Signature Sheat Alth Or a	Date:
3 18 240	3 1 13 1320
ndependent Result Con Commission 4 Con	k Street, May Court Building, Roseau Dominica Tel: 440 6634 / 7247

Regulating Electricity, Promoting Our Energy



PUBLIC NOTICE

INDEPENDENT REGULATORY COMMISSION (IRC)

For the Electricity Sector in the Commonwealth of Dominica

ELECTRICITY SUPPLY ACT No.10 of 2006 (ESA)

Application for Generation Licence

The public is advised that pursuant to Section 30 of the ESA, <u>Rodney's</u> <u>Wellness Retreat</u> has submitted an application to the Commission for the grant of a Generation Licence. The generator is to be located at <u>Kanawa</u>, <u>Brooklyn</u>, <u>Soufriere</u>.

A request has been made to be connected to the National Grid

Interested parties may access the details of the Application on the IRC website <u>www.ircdominica.org</u> or obtain a copy from the IRC's office at

42 Cork Street Roseau Tel. 440 6634 /4407247/6156635

Comments on the Application are to be submitted to the IRC by: October <u>13th</u> <u>2020.</u>

JUSTINN KASE EXECUTIVE DIRECTOR Independent Regulatory Commission Independent 42 Cork Street, P. O. Box 1687, Roseau

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