

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): First Name: Slowquist - Williams			
First Name: DIVIA OUT Last Name: DIVIA AND -XI III AMS			
Address: Pointe Huladre Estate			
Telephone: 235.50 7.4 Mobile: 61.3.33.24 Fax:			
Email address: legalblows & gmail.com.			
SECTION B.			
Information for Location of Installation:			
Name of Property Owner: Singicula Bouquist-Williams.			
Address: Pointe Mulatre Estate			
Telephone: Mobile: Fax: Fax:			
Email address:			
Type of Location: Residential ♥ Commercial □ Industrial □ Government □			
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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):3			
(c). Total PV (DC) Capacity (kWp)(d). Total Inverter (AC) Capacity (kW):			
(a). Foto: T (5-5) capacity (KTF)			
(e). PV Mounting Location: On Roof ☑ On Ground □ Other □			
(f). Type of Structure: House \square Apt. Building \square Office Building \square Educational \square			
Health Care ☐ Industrial ☐ Other ☑ 9arage			
(g). Describe Type of Roof (for roof mounted systems; sloped or flat, materials, etc.):			
(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:			



3. INVERTER INFORMATION	
(a). Number of Inverters: (b). Manufacturer: (c). Model #s: (d). AC Rating of Inverters: (e). Proposed Inverter Locations: (f). Certifications: (n) S 0 4/38 (CG)	
4. PV MODULE INFORMATION	
(a). Number of Modules: (b). Manufacturer: (c). Model #s: (d). Dimensions of each module: (e). Module Power Rating (kWp): (f). Certifications:	
5. STORAGE INFORMATION	
(a). Does the system include storage? Yes No (b). If Yes state the total capacity (Ah): (c). Battery Model #: (d). Manufacturer: (e). Battery Type (FLA, Li-ion, etc.): (e). Total Voltage of Storage: (f). Expected Daily kWh usage from storage: (g). Certifications:	
6. MOUNTING SYSTEM INFORMATION	ON
(a). Describe Mounting System: Flat Roof (b). Manufacturer: Soke os (c). Model #: Soke os 6 m o 6	

Attached?



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)

One-line diagram of the proposed solar system:	7
Inverters Spec. Sheet:	
Solar Moules spec. sheet:	
Storage System spec. sheet (if applicable):	□ <i>N</i> ↑
Mounting System spec. sheet (if applicable):	□ N#
8. DECLARATION	IS
Applicant Signature:	re that the information contained in this
If application is prepared by someone other than the main a	pplicant please provide details below:
Name (block letters):	
Address:	
Tel. #:	

Date:

Signature

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PUBLIC NOTICE

INDEPENDENT REGULATORY COMMISSION (IRC)

For the Electricity Sector in the Commonwealth of Dominica

Application for Generation Licence

(As mandated under the)

ELECTRICITY SUPPLY ACT (ESA) 2006, No.10 of 2006

The public is advised that pursuant to Section 30 of the ESA, Mrs. Singoalla Blomqvist-Williams has submitted an application to the Commission for the grant of a Generation Licence for Solar Generation.

The Solar generator will be located at **Pointe Mulatre Estate**, **Delice**, **Dominica**.

Objections or Comments on the Application are to be submitted to the IRC by: August 25th, 2022.

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

42 Cork Street

Roseau

Tel. 440 6634 /4407247

JUSTINN KASE

EXECUTIVE DIRECTOR

Independent Regulatory Commission

Independent Regulatory Commission

42 Cork Street, P. O. Box 1687, Roseau Roseau, Commonwealth of Dominica Office: 767 440 6634/7247 Fax: 767 440 6635 admin@ircdominica.org

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