## **Certification of Completion**

The Interconnection Customer should complete the Distributed Energy Resource Certification of Completion for a proposed DER interconnection in the Simplified Process Track. As a condition of interconnection, a completed copy of this form must be returned to the Utility.

Distributed Energy Resource Information			
Interconnection Customer:			
DER Project Address:			
DENTIFICE Address.			
City:		State:	Zip Code:
Application ID:	Meter Num	ber:	
Is the DER system owner-installed?	☐ Yes ☐ No (If no please completed Installer Information)		
Installer Information			
Contact Name:			
Name of Business:			
Email:		Phone:	
Electrician Name		License #	
Electrical Permitting Authority			
The DER has been installed and inspected in compliance with the local electrical permitting authority as verified by the signature below or the additionally attached document.			
Inspector Signature:	Date:		
Inspector Name:	Authority Having Jurisdiction (city/county):		
***Please print clearly or type and return completed along with any additional documentation***			
For Office Use Only			
Date Received:			