

**Generating Facility Certificate of Completion**

Is the Generating Facility owner-installed? Yes \_\_\_\_\_ No \_\_\_\_\_

Interconnection Customer: \_\_\_\_\_

Contact Person – *if different from above*: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Daytime Ph. #: \_\_\_\_\_ Evening Ph #: \_\_\_\_\_

Fax #: \_\_\_\_\_ e-mail Address: \_\_\_\_\_

Generating Facility Address -- *if different from above*:

\_\_\_\_\_ City: \_\_\_\_\_

Electrician's Name: \_\_\_\_\_ License number: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone (Day): \_\_\_\_\_ (Evening): \_\_\_\_\_

Fax: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

PUD Approved Installation Date: \_\_\_\_\_ Application ID number: \_\_\_\_\_

Inspection: this Generating Facility has been installed and inspected in compliance with the local building/electrical code of \_\_\_\_\_

Signed (Local electrical wiring inspector, or attach signed electrical inspection):

\_\_\_\_\_

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_