



Distributed Generaton Facility Wiring Statement or Certificate of Inspection

<input type="checkbox"/> Wiring Statement for DG Installation <input type="checkbox"/> Certificate of Electrical Inspection	Customer Name			
Inspector's Name	Owner of Premises <input type="checkbox"/> Same as above			
Inspector's Phone No. ()	Service Address	City	State	Zip Code
Inspection Date	Firm/Electrical Contractor's Name		Phone No. ()	
Distributed Generation Installer Docket No.	Firm/Electrical Contractor's Address	City	State	Zip Code
Type of Service (Check all that apply)				
<input type="checkbox"/> Residential <input type="checkbox"/> Overhead <input type="checkbox"/> 1 Phase Service _____ AMPS _____ VOLTS				
<input type="checkbox"/> Farm <input type="checkbox"/> Underground <input type="checkbox"/> 3 Phase Service _____ AMPS _____ VOLTS				
<input type="checkbox"/> Commercial				
JCE Co-op use only				
Work Order or Service Order No. _____ Service Location Number _____				
I have either examined the Distributed Generation Facility at the above named address or I made the installation myself. I hearby certify the installation was made in accordance with the National Electric Code.				
Electrician or Inspector Signature _____			Date _____	