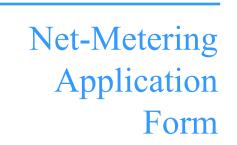
	APPLICATION PROCESS
1	Inquire at TEI Help Desk to determine requirements.
2	Submit all requirements at TEI CWD for survey and inspection of RE Facility.
3	After survey, the application will be forwarded to our SPDD (System Planning & Design Department) for Distribution Impact Study (DIS). Note: Based on the study, there maybe changes in our distribution facilities.
4	Upon approval of the study, our technical team will conduct the testing and commissioning of RE Facility for the final approval of interconnection.
5	Upon approval of the RE Facility, sign the Net Metering Agree- ment at TEI CWD and issue a cashier's or manager's check paya- ble to ERC (Energy Regulatory Commission) amounting to P1,500.00 for Certificate of Compliance Processing Fee.
6	Installation of Net-Metering Facilities.

LOCATION SKETCH





Mabini St., Tarlac City Tel. No. 982-5000 Fax No. (045) 982-2842 Email: cwd@tei.ph

I hereby certify that the foregoing information is true and complete. I understand that I will be responsible for all charges associated with the application. I agree to receive any information or advisory regarding my electric service thru the contact numbers and email address provided herein.

Furthermore, I will inform the company of any changes on the information herein provided that may occur in the future.

Applicant's Signature

REQUIREMENTS

- Letter of Intent to participate in Net-Metering Program
- Net-Metering Application Form
- Electrical Plan with Renewable Energy (RE) Modification signed and sealed by professional electrical engineer
- Electrical Permit for Net-Metering from City Engineers Office—Electrical Section at Tarlac City Hall
- Technical Specifications of RE Facility
- Certificates of RE Facility (proof that the facility passed the international standards such as IEC IEEE, and others)
- Energy Regulatory Commission (ERC) Certificate of Compliance (COC) Form No.1 & 2
- Community Tax Certificate (CEDULA)
- Two (2) Valid IDs, any of the following: - Driver's License, Passport, PRC License, SSS ID, GSIS ID, Senior Citizen's ID, TIN ID, Postal ID, New COMELEC Voter's ID or Voter's Certification, Original NBI Clearance, Credit Card with photo & signature

TYPE OF RE FACILITY Solar Hydro Wind Others: Biomass NUMBER OF PHASE Capacity Output (Watts peak) Single Phase (1Ø) Three Phase (3Ø) Module/Panel Brand & Model Rated Power Output (Watts peak) Voltage Output (Volts DC) Number of Pieces Installed Inverter Brand & Model
Wind Others: Biomass NUMBER OF PHASE Capacity Output (Watts peak) Single Phase (1Ø) Three Phase (3Ø) Three Phase (3Ø) Module/Panel Brand & Model Voltage Output (Volts DC) Rated Power Output (Watts peak) Voltage Output (Volts DC) Number of Pieces Installed Inverter Brand & Model
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Inverter Brand & Model
Inverter Brand & Model
Rated Power Output (Watts) Voltage Output (Volts AC)
Number of Pieces Installed
RE FACILITY PROVIDER (Installation in Charge)
Name (Last Name, First Name M.I.)
Company Name
Complete Business Address
Mobile No. Telephone No. Fax No.

CUSTO	MER ACCOUNT IN	FORMATION	Emple
Account Number			Employer /
Account Name			Address
SERVICE LOCATION			Position
Unit No.	Floor No.		
Building / Apartment Na	ame		-
			Company /
Block No.	Lot No.	House No.	Company /
Street			Email Addre
Subdivision Name			Mobile No.
Barangay			
Darangay			TYPE OF C
Nearest TEI Pole No. /	TEI Customer / Landr	nark	Sole
DELIVERY OF STATE	MENT OF ACCOUNT	(SOA)	Name (Last
Service Location	Shor	t Message Service (SMS)	
Email			Home Addr
HOUSE / BUILDING O	WNERSHIP		
Owned	Rented	Others:	Position
Name (Last Name, First N			Signatura
Complete Address			Signature
			Name (Last
Mobile No.	Telephone No.	Fax No.	
			Home Addr
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PERSONAL INFORMA			
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Birthdate (mm-dd-yyyy)	Civil Status	TIN	
Email Address		Citizenship	Name (Last
Mahila Na	T - 1 1 N1 -		Home Addr
Mobile No.	Telephone No.	Fax No.	Home Addr
		Fax No.	Home Addr
Name of Spouse / Near		Fax No.	_
		Fax No.	_
		Fax No.	Home Addr Position Signature

EMPLOYMENT INFORMATION

Address		
	TalasharaNi	E . N.
Position	Telephone No.	Fax No.
FOR	COMMERCIAL CUST	OMER
Company / Business Na	ime	
Email Address		TIN
Mobile No.	Telephone No.	Fax No.
TYPE OF ORGANIZAT	ION / BUSINESS	
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Partnership	Others:	
Corporation		
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Home Address		
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Signature		Mobile No.
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Signature Name (Last Name, First Na Home Address Position Signature AUTH Name (Last Name, First Na Home Address	Telephone No. ORIZED REPRESEN ame Middle Name)	Mobile No.