| **Renewable Energy Generating System**  **Annexure-I**  **(Commissioning Report for RE System)** | | |
| --- | --- | --- |
| **Sr. No.** | **Particulars** | **As Commissioned** |
| 1 | Name of the Consumer | {{client\_name}} |
| 2 | Consumer Number | {{consumer\_number}} |
| 3 | Mobile Number | {{phone\_number}} |
| 4 | E-mail | {{email}} |
| 5 | Address of Installation | {{client\_address}} |
| 6 | RE Arrangement Type | Net Metering Arrangement |
| 7 | RE Source | Solar Power Plant |
| 8 | Sanctioned Capacity (KW) | {{ClientCapacity}} |
| 9 | Capacity Type | {{Capacity\_Type}} |
| 10 | Project Model | {{project\_model}} |
| 11 | RE installed Capacity (Rooftop)(KW) | {{capacity}} |
| 12 | RE installed Capacity (Rooftop + Ground) (KW) | NA |
| 13 | RE installed Capacity (Ground)(KW) | NA |
| 14 | Installation Date | {{Date\_of\_Installation}} |
| 15 | Solar PV Details | |
|  | Inverter Capacity (KW) | {{inverter\_rating}} |
|  | Inverter Make | {{inverter\_details}} |
|  | No. of PV Modules | {{number\_of\_modules}} |
|  | Module Capacity (KW) | {{module\_wattage}} |

**Proforma-A**

**COMMISSIONING REPORT (PROVISIONAL) FOR GRID CONNECTED SOLAR**

**PHOTOVOLTAIC POWER PLANT (with Net-metering facility)**

Certified that a Grid Connected SPV Power Plant of **{{capacity}}** capacity has been installed at the site **{{client\_address}}.** District **{{district}}** of MAHARASHTRA which has been installed by M/S **Soryouth RE Pvt. Ltd.** on **{{Date\_of\_Installation}}**. The system is as per BIS/MNRE specifications. The system has been checked for its performance and found in order for further commissioning.

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| --- | --- |
| **Signature of the beneficiary** | **Signature of the agency with name, seal and date** |

The above RTS installation has been inspected by me for **Pre-Commissioning Testing of Roof Top Solar Connection** on dt **{{Date\_of\_Installation}}** as per guidelines issued by the office of The Chief Engineer vide letter no 21653 on dt 18.08.2022 and found in order for commissioning.

**Signature of the MSEDCL Officer**

**Name:**

**Designation:**

**Date and seal:**