

System Design Authorization:

Photography Release:

Customer Information:

Customer Name: Jasmeet Bajwa  
Customer Address: 632 Roxboro Ct

System Description:

Array Size:







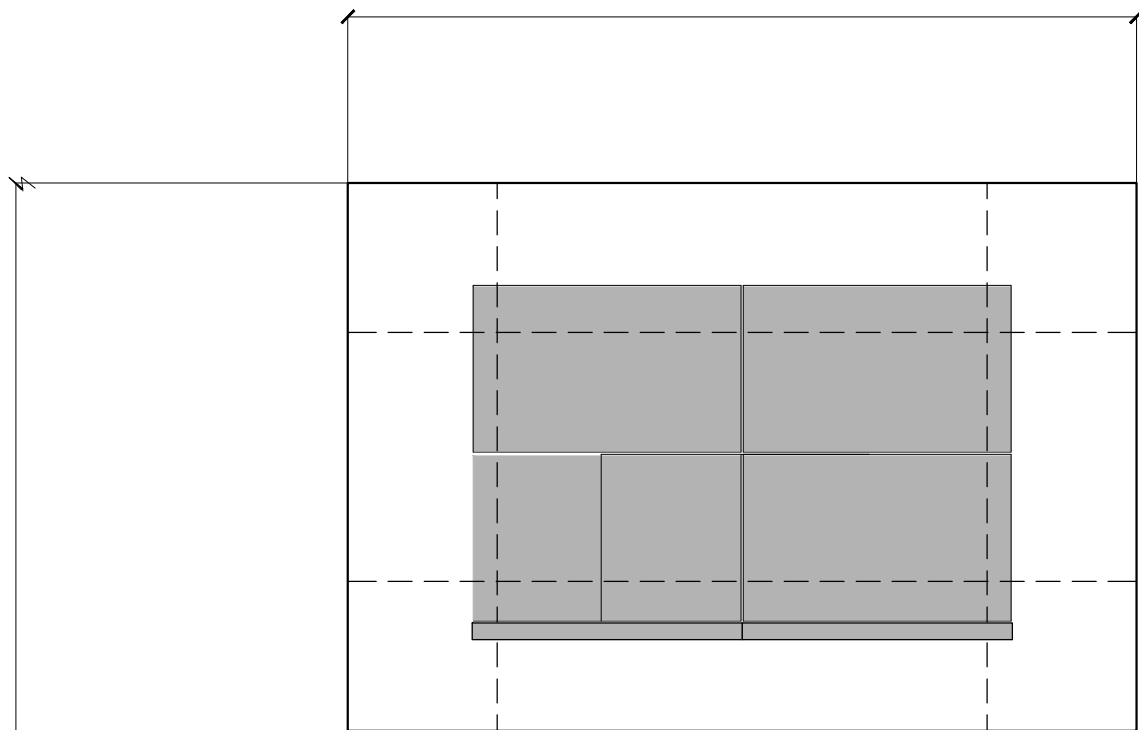
IG-1VL	IG-1VLnl
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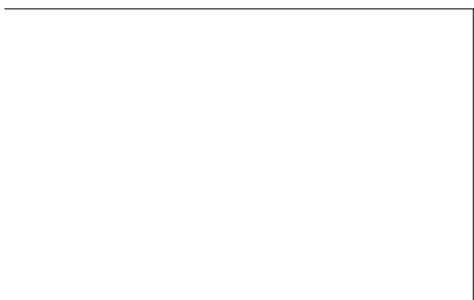


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IG-1VL	IG-1VL
	IG-1VL
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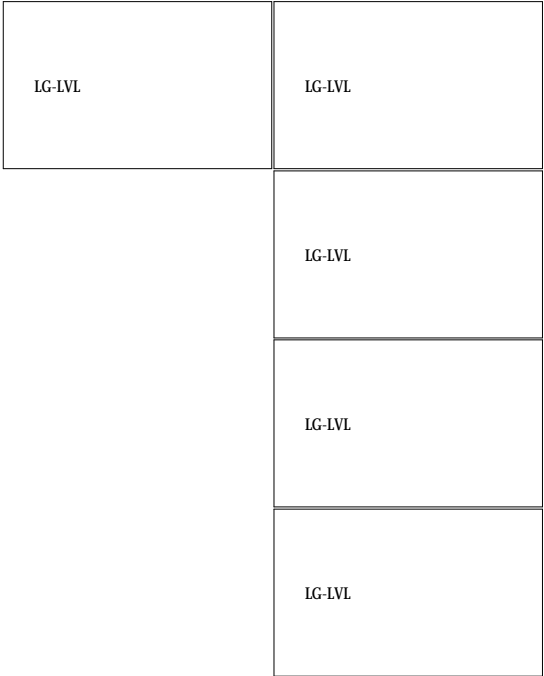
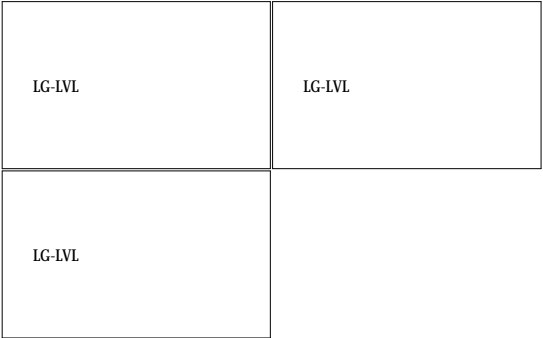








LG-LVL	
LG-LVL	

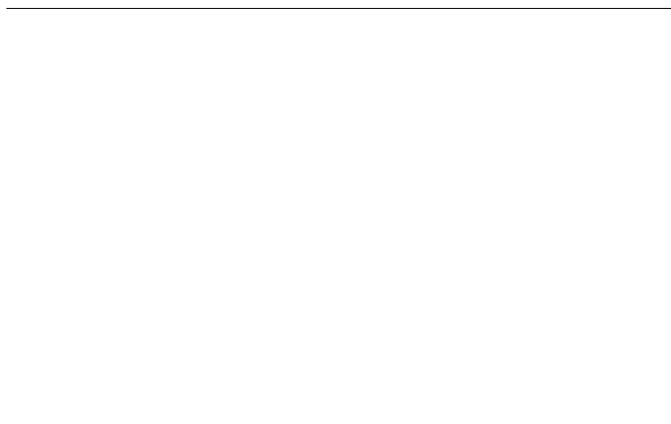


SE10000A-US  
LG 315N1C-G4

0  
844-GO-LEVEL

86	Roof 1	FJ»	6
266	Roof 2	FJ»	10
86	Roof 3	I €»	8
266	Roof 4	I €»	8
86	Roof 8	FJ»	4

132696 - Jasmeet Bajwa  
632 Roxboro Ct  
East Meadow, NY, 11554



LG-LVL	LG-LVL
LG-LVL	
LG-LVL	
LG-LVL	

Name: Jasmeet Bajwa  
# 132696  
Address: 632 Roxboro Ct, East Meadow, NY, 11554

Testimonial

Thank you for choosing Level Solar! We are delighted to serve you!  
Please share anything you like about your experience with Level Solar:

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Right To Use

I grant to Level Solar, its representatives and employees the right to use all or part of my statement above, and publish it on my behalf.

Signature \_\_\_\_\_ Date \_\_\_\_\_





**PSEG Long Island Contractor Self Certification Form for Inverter based Systems 25 kW or less**

**Inverter-based System VERIFICATION TESTING PROCEDURE TEMPLATE**

**Tested By:** \_\_\_\_\_

**Customer Name:** Jasmeet Bajwa

**Date Tested:** \_\_\_\_\_

**Customer Acct#:** 4024525904

**Weather Conditions:** \_\_\_\_\_

**Customer Address:** 632 Roxboro Ct

**PV System Size:** 11.340 kW

East Meadow

**Testing Procedure Steps:**

1. Make sure that the PV system is online and the breakers are closed.
2. Open the AC point of disconnect to this string. Verify that the inverters shut down immediately.

☐

**Check here to verify the inverters shutdown immediately in accordance with the manufacturer's specification.**

3. Close the AC point of disconnect to the string and note the inverters should not reconnect for at least 5 minutes.

- If possible, visually verify that the inverters have stopped exporting power (during this five-minute interval) by looking at the LED's on each inverter and verifying that the amber LED is lit.
- LED Light must be lit for 5 min. or more in order to pass inspection.
- Test must be performed 3 times for each inverter or if micro inverter, each string.
- Enter Time LED was lit for each test.

**Time Test Performed**  
**(hh:mm:ss)**

**Time System Reconnected**  
**(hh:mm:ss)**

**Circle 5 Minutes or Greater**

1. T: \_\_\_\_\_

T: \_\_\_\_\_

Yes or No

2. T: \_\_\_\_\_

T: \_\_\_\_\_

Yes or No

3. T: \_\_\_\_\_

T: \_\_\_\_\_

Yes or No

☐

**Check here to verify that the test has been successfully applied to the other inverters**

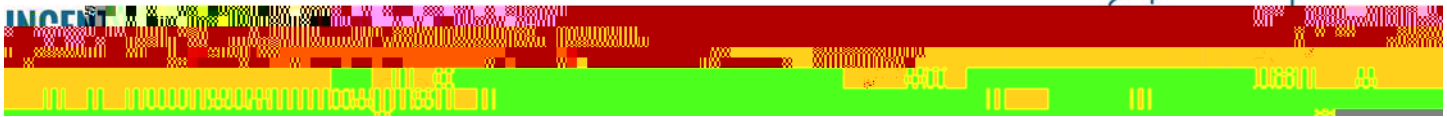
*(This Document is to be submitted by Project Closeout)*

Signature: \_\_\_\_\_

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

Company: \_\_\_\_\_

Date: \_\_\_\_\_



Contractor Name: Level Solar Inc. Installer Name: Level Solar Inc.

Customer Name: Jasmeet Bajwa Installation Address: 632 Roxboro Ct, East Meadow, NY, 11554

NYSERDA Application Number (i.e. 4000-12345): 5159- NYSERDA PO Number (5 digits):

REQUESTING: ☐ 25% ☐ 75% ☒ 100%

Total Approved Incentive Amount: \$1,632.96 Total Requested Amount: \$1,632.96

**If requesting 100%, both the 75% request and 25% request sections must be completed.**

Indicate: ☐ Residential/Small Commercial Program (<200kW) - send to PVInvoices@nyserda.ny.gov

☒ Residential/Small Commercial Program (<200kW) Long Island - send to PVInvoiceLI@pseg.com

### ITEMS TO BE INCLUDED WITH 75% REQUEST

☒ Building Permit or any and all permits as required by AHJ (if not previously submitted)

☒ List equipment & delivery date:

	Quantity	Manufacturer	Model	Date Delivered
Inverter(s)	<u>1</u>	<u>SolarEdge</u>	<u>SE10000A-US</u>	<u></u>
Modules	<u>36</u>	<u>LG Electronics</u>	<u>315N1C-G4</u>	<u></u>

Customer/Contractor certifies that all approved system components listed above have been delivered to the installation address, and all permits and approvals have been obtained.

CUSTOMER Signature:  Date:

**Signature must be a verifiable electronic signature or in hard copy form.**

CONTRACTOR Signature:  Date:

**If executed by Installer, Installer and Contractor certify that Installer is authorized by Contractor to do so.**

### ITEMS TO BE INCLUDED WITH 25% REQUEST

☒ Utility Interconnection Letter Installation Date:  Utility Interconnection Date:

☒ Final inspection certificate issued by AHJ; OR Electrical inspection certificate; OR Digital photo of inspection sticker

☒ Identify below all crew members who served in primary role during installation of the system:

Shawn Rinaldo Lennon Wu  
Eric Seeman

### Energy Efficiency Certification - Required for the Affordable Solar residential incentive.

☐ Installer/Contractor has verified that efficient lighting and low-flow water devices are installed at the residence, meeting the requirements of the **Affordable Solar** residential incentive, as outlined in the NY-Sun Program Manual.

Customer/Contractor certifies that all installation responsibilities have been completed by the Installer/Contractor as outlined in the Solar PV Program Manual. I attest that the PV System is operational, and further agree to notify NYSERDA should the PV system be non-operational for any 4 week period of time going forward.

☒ Customer has received a copy of the Operations and Maintenance Manual.

☒ Eligible Installer/Contractor has inspected the system to verify it meets all codes & NYSERDA's Program requirements.

☒ Eligible Installer/Contractor has given instruction on the operation of the system to the Customer.

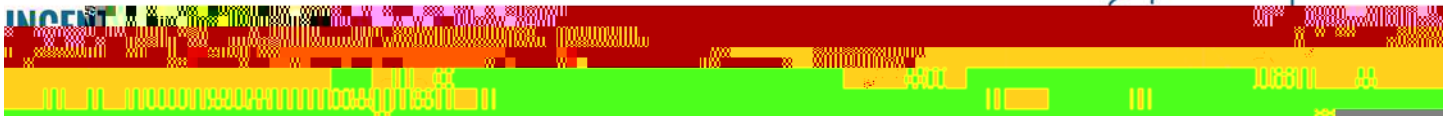
CUSTOMER Signature:  Date:

**Signature must be a verifiable electronic signature or in hard copy form.**

CONTRACTOR Signature:  Date:

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☒ Residential/Small Commercial Program (<200kW) Long Island - send to PVInvoiceLI@pseg.com

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☒ List equipment & delivery date:

	Quantity	Manufacturer	Model	Date Delivered
Inverter(s)	<u></u>	<u></u>	<u></u>	<u></u>
Modules	<u></u>	<u></u>	<u></u>	<u></u>

Customer/Contractor certifies that all approved system components listed above have been delivered to the installation address, and all permits and approvals have been obtained.

**CUSTOMER Signature:**  Date:

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**CONTRACTOR Signature:**  Date:

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<u>Eric Seeman</u>	<u></u>

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☒ Eligible Installer/Contractor has given instruction on the operation of the system to the Customer.

**CUSTOMER Signature:**  Date:

**Signature must be a verifiable electronic signature or in hard copy form.**

**CONTRACTOR Signature:**  Date:

**If executed by Installer, Installer and Contractor certify that Installer is authorized by Contractor to do so.**

Contractor Name: Level Solar Inc. Installer Name: Level Solar Inc.

Customer Name: \_\_\_\_\_ Installation Address: \_\_\_\_\_

NYSERDA Application Number (last 5 digits): \_\_\_\_\_ NYSERDA PO Number (5 digits): \_\_\_\_\_

Electric Utility: ☐ CHG&E ☐ Con Ed ☐ N. Grid ☐ NYSEG ☐ O&R ☐ NYPA ☐ RG&E ☒ PSEG LI

Indicate: ☐ Residential/Small Commercial Program (<200kW) - send to PVForms@nyserda.ny.gov

☒ Residential/Small Commercial Program (<200kW) Long Island - send to PVFormsLI@pseg.com

Request Type: ☒ **CHANGE ORDER** ☐ **CANCELLATION**

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### COMPLETE THIS SECTION ONLY IF THIS IS A CHANGE ORDER:

*Refer to Section 2.6 of the PV Solar Program Manual for Rules.*

#### NEW SYSTEM INFORMATION:

Will project use GJGNY financing? ☐ Yes ☒ No If yes, submit a new ProForma Tool for any change to the system size

Is additional incentive requested? ☐ Yes ☐ No NEW NYSERDA Incentive: \_\_\_\_\_

NEW System size (kW): \_\_\_\_\_

Equipment:	Quantity:	Cost:	Manufacturer/Model:
Modules:	_____	_____	_____
Inverter(s):	_____	_____	_____
Balance of System:	_____	_____	_____
Installation/Labor:	_____	_____	_____
Other:	_____	_____	_____
<b>TOTAL PRICE:</b>	_____	_____	

*If applicable, attach a revised 1 or 3-line drawing.*

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CUSTOMER Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Signature must be a verifiable electronic signature or in hard copy form.**

CONTRACTOR Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**If executed by Installer, Installer and Contractor certify that Installer is authorized by Contractor to do so.**

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#### NYSERDA USE ONLY:

Approved in PC by (initials): \_\_\_\_\_ Date: \_\_\_\_\_ PO#: \_\_\_\_\_

Original PO Amt: \_\_\_\_\_ Amt of PO Increase: \_\_\_\_\_ New PO Amt: \_\_\_\_\_

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