



NET METERING APPLICATION

(must be completed by Account Holder)

PROJECT INFORMATION	
MEMBER NAME (Last, First, Middle)	PROJECT LOCATION
METER NUMBER	WILL PROPERTY BE USED FOR COMMERCIAL PURPOSES? (i.e., home business, etc.) <div style="display: flex; justify-content: space-around;"> YES <input type="checkbox"/> NO <input type="checkbox"/> </div>
ACCOUNT NUMBER	BATTERY BACKUP <div style="display: flex; justify-content: space-around;"> YES <input type="checkbox"/> NO <input type="checkbox"/> </div>
PREFERRED CONTACT INFORMATION (phone number or email)	
GENERATION SITE INFORMATION	
Maximum Size: 25 kW	
COMPANY NAME	PROJECT CONTACT (name and phone #)
SOLAR: # OF PANELS _____ INDIVIDUAL PANEL RATING (kW DC) _____ MANUFACTURER _____ MODEL _____ OTHER: RESOURCE TYPE _____ RATING _____ # OF UNITS _____ OUTPUT AC DC TOTAL SYSTEM KW _____	
INVERTER INFORMATION	
# OF INVERTERS _____ WATT SIZE (each) _____ MANUFACTURER _____ MODEL _____ VOLTAGE _____	
PHASE: SINGLE THREE	IS INVERTER UL 1741 or IEEE 1547 LISTED YES NO

Account Holder Acknowledgment

I certify that the information provided in this application is correct to the best of my knowledge.

I give permission for Fall River Electric to discuss my project and electric usage history with the Project Contact/Company listed above.

I certify that I have reviewed Fall Rivers Net Metering Tariff and understand that the Tariff is subject to change.

Account Holder
Signature _____

Account Holder _____

Phone _____ Email _____ Date _____

Once completed, please e-mail or mail this form to Fall River Rural Electric Cooperative:

netmetering@fallriverelectric.com

1150 N 3400 E
Ashton, ID 83420
Toll Free: 800-632-5726

Please allow up to 5 business days for a response to your application