



**CHAMUNDESHWARI ELECTRICITY SUPPLY CORPORATION  
LIMITED, MYSURU**

(A Government of Karnataka Undertaking)

**Application Form for Grid Connectivity Solar Roof Top PV  
Generation system on Gross/Net Metering Basis**

**Please affix  
recent passport  
size photograph  
of applicant.**

**1. Applicant Details :** (please tick (√) on the appropriate box and fill details)

<input type="checkbox"/> New	<input type="checkbox"/> Additional	<input type="checkbox"/> Multiple
<input type="checkbox"/> Gross Metering	<input type="checkbox"/> Net Metering	
<input type="checkbox"/> Individual	<input type="checkbox"/> Company /Trust /Co-operative	<input type="checkbox"/> Partnership
<b>Type of investment:</b>	a. <input type="checkbox"/> Own investment by the Consumer	
b. <input type="checkbox"/> Utility –Centric business model (please specify the model):		
<input type="checkbox"/> Consumer owned Model (Utility as aggregator) <input type="checkbox"/> Consumer Owned Model (Utility as aggregator and EPC) <input type="checkbox"/> Consumer Owned Model (Utility as aggregator and investor) <input type="checkbox"/> Third party owned Model (Utility acts as an aggregator and trader):		
c. <input type="checkbox"/> Third Party Investment Model:		
d. <input type="checkbox"/> Any Other please specify the scheme :		

<b>Name of the Applicant</b>																								
<b>Address &amp; Contact details:</b>																								
House/Flat/ Shop No										Location										Cross				
Main					Street					City					Pin code									
Landmark										Mobile										Pin code				
Land Line Ph.No.										Mobile										Pin code				
Email																								

**2. Installation Details:**

Sub-division		
Section		
RR Number		
Account ID No.		
<b>Sanctioned Load in kW:</b>	<b>Contract Demand in KVA:</b>	
<b>Category of Installation:</b>		
<input type="checkbox"/> Residential	<input type="checkbox"/> Commercial	<input type="checkbox"/> Industrial
<input type="checkbox"/> Educational Institution	<input type="checkbox"/> Government Organization	<input type="checkbox"/> Hospitals
<input type="checkbox"/> Others (Please specify)		

### 3. Rooftop System details

Proposed Capacity of Solar RTPV power plant in kW peak:			
<b>Type of Installation</b>	<input type="checkbox"/> Single phase LT (Up to and inclusive of 5kWp)	<input type="checkbox"/> Three phase LT (above 5kWp up to 150kWp)	<input type="checkbox"/> HT (above 150kWp up to 2000kWp)

### 4. Existing shadow free area of Rooftop in sq. mt/Sq Ft:

### 5. Subsidy

Whether applicant wish to avail MNRE subsidy	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If MNRE Subsidy is availed, sanctioned or not	<input type="checkbox"/> Yes	<input type="checkbox"/> No

### 6. Documents enclosed:

1.	Copy of latest Electricity bill	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2.	Authorization letter in case of company/Trust/Co-operatives / Partnership	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3.	Copy of the Subsidy sanctioned letter from MNRE (if applicable)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4.	Self-certification for not availing subsidy from MNRE	<input type="checkbox"/> Yes	<input type="checkbox"/> No

### 7. Certificate:

1. The above stated information's are true to best of my knowledge.
2. Certified that my building can take up the proposed weight of Solar PV system.
3. **In case of Net-Metering, certified that I am not availing power from other sources/captive sources through Open Access mechanism.**

Place:

Signature of the applicant

Date:

Name: