



AusNet Services Alteration or Upgrade of Inverter Energy System

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|------------------------------------|--|--|--|--|--|
| Inverter Energy System Type | <input type="checkbox"/> Solar <input type="checkbox"/> Wind | <input type="checkbox"/> Solar <input type="checkbox"/> Wind | <input type="checkbox"/> Solar/Wind Combined | <input type="checkbox"/> Other..... | <input type="checkbox"/> Other..... |
| System Size Limit | Up to 4.6kW | 4.6kW- 15kW <input type="checkbox"/> Single line diagram included | 4.6kW- 15kW <input type="checkbox"/> Single line diagram included | Up to 4.6kW | 4.6kW- 15kW <input type="checkbox"/> Single line diagram included |
| Customer Phases | 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> | 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> | 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> | 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> | 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> |

SECTION 1: INSTALLATION DETAILS *(to be completed, signed and submitted to AusNet Services by the installer)*

| | | | |
|--|------------------------------|---|------------------------------|
| Installer Company Name | | Installer Phone Number | |
| Installer Company Address | | | |
| Is an existing Embedded Generator Installed at this premise | <input type="checkbox"/> Yes | <input type="checkbox"/> No | _____ kW |
| Total Installed Capacity (Total rating of, all solar panels, all turbines, or all other energy sources including existing total panel rating) | _____ kW | Inverter Power Rating (1 hour or continuous rating. Include existing Inverter details) | _____ kW _____ kW |
| Installed Capacity Per Phase (mark N/A for phases not available) | Phase A: _____ kW | Phase B: _____ kW | Phase C: _____ kW |
| Operating Manual Provided to Customer | <input type="checkbox"/> Yes | Instructed Customer in Operation of system | <input type="checkbox"/> Yes |

By signing this form, you acknowledge and represent that the information provided is true and correct.

Installer Name: _____ Installer Accreditation No*: _____

Installer Signature: _____ Date: _____

SECTION 2: INSTALLATION COMPLIANCE *(to be completed and signed by the Registered Electrical Contractor)*

| | | | | |
|----------------------------------|---|---|-------------------------------------|---|
| Inverter Number of Phases | <input type="checkbox"/> Single phase 230V | <input type="checkbox"/> Three phase 400V | Access to Meter, Switchboard | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | <input type="checkbox"/> Two phase 230/400V | <input type="checkbox"/> Two phase 230/460V | | |
| Load Number of Phases | <input type="checkbox"/> Single phase 230V | <input type="checkbox"/> Three phase 400V | | |
| | <input type="checkbox"/> Two phase 230/400V | <input type="checkbox"/> Two phase 230/460V | | |

INVERTER TEST RECORDS This test must be conducted at a time of day when the prevailing weather conditions allow the PV system to be producing at least a minimum output. This must be greater than 20% of the rated output of the PV array or the inverter (whichever is less)

| | | |
|--|----------------------------------|--|
| <u>INVERTER TYPE 1 (include existing Inverter details)</u> | <u>Inverter Make</u> | <u>Inverter Model</u> |
| MICRO INVERTERS Yes <input type="checkbox"/> No <input type="checkbox"/> | | |
| ANTI ISLANDING OPERATION | Total Inverters Installed | |
| | | |
| Test 1: Time for inverter/s to disconnect. Must be < 2 seconds to pass | <u>Measurement</u> | <u>Result (please circle one)</u> |
| | _____ Seconds | Pass/Fail |
| Test 2: Time for inverter to reconnect. Must be > 60 seconds to pass | | |
| | _____ Seconds | Pass/Fail |



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| | | |
|---|---|--|
| <u>INVERTER TYPE 2 (if applicable)</u> MICRO INVERTERS Yes <input type="checkbox"/> No <input type="checkbox"/> ANTI ISLANDING OPERATION | <u>Inverter Make</u> Total Inverters Installed | <u>Inverter Model</u> |
| Test 1: Time for inverter/s to disconnect. Must be < 2 seconds to pass | <u>Measurement</u> _____ Seconds | <u>Result (please circle one)</u> Pass/Fail |
| Test 2: Time for inverter to reconnect. Must be > 60 seconds to pass | _____ Seconds | Pass/Fail |

By signing this form, you acknowledge and represent that:

- the Inverter Energy System complies with the *Electricity Safety Act 1998* (Vic) and associated Safety Regulations, the Electricity Distribution Code, the Victorian Service & Installation Rules, AS/NZS3000 (Wiring Rules) and AS4777 (Grid Connection of Energy Systems via Inverters), and any other relevant Acts, regulations, standards or guidelines;
 - the Inverter Energy System is connected to a dedicated circuit complete with lockable isolating switch at the switchboard;
 - the main switchboard, isolating fuse/switch/circuit breaker are labelled correctly;
- commissioning tests as specified in the Service & Installation Rules and in section 2 of this form have been completed and passed.
 - alternative supply signage has been installed;
 - a Prescribed Certificate of Electrical Safety (CES) has been obtained; with
 - copies of this form and the CES to be sent directly to AusNet Services and the Inverter Energy System owner's Retailer.

TESTS UNDERTAKEN BY:

Licenced Electrical Installation Worker Name: _____

Licence No*: _____ **Date:** _____

Signature: _____

SECTION 3: INVERTER ENERGY SYSTEM OWNER DETAILS (to be completed and signed by the IES owner)

| | | | |
|-------------------------------|------------------------|---|--|
| Customer Name* | | Customer NMI* <small>(Refer to your electricity bill)</small> | |
| Supply Address* | | Mailing Address* | |
| Phone Number* | Business Hours: | After Hours: | |
| Existing Meter Number* | | | |

CUSTOMER ACKNOWLEDGEMENT, INDEMNITY AND RELEASE

By signing this form, you acknowledge and represent that you have read, understand and agree to comply with the connection obligations, and that you:

- are the owner of the Inverter Energy System listed under the Supply Address in section 3 above;
- have received an Inverter Energy System operating manual from, and been instructed on the operation of the Inverter Energy System by, the Installation Company detailed in section 1;
- accept that approval will only be granted for the Inverter Energy System detailed in this form, and that you must obtain further prior approval from your Distributor to alter your Inverter Energy System in any way;
- release and indemnify and agree to keep indemnified your Distributor, its officers, employees and agents against all actions, proceedings, claims and demands whatsoever which may be brought, including any indirect or consequential loss or any other form of pure economic loss, made or prosecuted against them or any of them by any person in respect of the installation of your Inverter Energy System, particularly in relation to works completed by the Installation Company detailed in section 1 or the compliance certification provided by the registered electrical contractor in section 2, or in respect of connection of your Inverter Energy System to the Victorian electricity grid.

Customer Name: _____ **Customer Signature:** _____ **Date:** _____

PRIVACY STATEMENT: The personal information you provide in this form will be collected by your Distributor for the purpose of connecting your Inverter Energy System to the Victorian electricity grid. This information will be used and disclosed by your Distributor in accordance with its privacy processes. You can find more information on your Distributor's privacy processes on their website.