



**Net Metering and Small Generation Interconnection Agreement Application**

**Customer-Generator Information**

Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Facility Address: \_\_\_\_\_  
(if different than above)  
Daytime Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_  
City Utility Customer Account Number (from utility bill): \_\_\_\_\_  
Does Customer-Generator Lease Property?  Yes  No  
(If yes, attach a copy of authorization from the property owner to proceed with installation.)

**Generator Facility Information**

System Type: \_\_\_\_\_  
Generator Size (kW AC): \_\_\_\_\_  
Inverter Manufacturers and Models: \_\_\_\_\_  
Inverter Serial Number: \_\_\_\_\_ Inverter Power Rating: \_\_\_\_\_  
Inverter Location: \_\_\_\_\_

*Attach the system one-line diagram and specification sheets for equipment being installed. Drawing plans must comport to generally accepted engineering design practices.*

**Generation Facility Installation Information**

Licensed Electrician: \_\_\_\_\_ Contractor Number: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Daytime Phone: \_\_\_\_\_ Installation Date: \_\_\_\_\_

Net Metering and Small Generation Interconnection Agreement Terms: Net Metering is governed by Idaho Falls City Code Chapter 5, Section 8 and the latest version of the Idaho Falls Power Service Policy. By executing this application, the Customer-Generator agrees to construct and operate the Generation Facility according to all terms and conditions identified in both the City Code and the Service Policy.

**ACKNOWLEDGMENT**

STATE OF \_\_\_\_\_ )  
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COUNTY OF \_\_\_\_\_ )

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me the undersigned, a notary public in and for said state, personally appeared \_\_\_\_\_, known or identified to me to be the person whose name is subscribed below and acknowledged to me that he/she executed the same.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal the day and the year in this certificate first above written.

\_\_\_\_\_  
Notary Public for the State of \_\_\_\_\_  
Residing at: \_\_\_\_\_  
Commission Expiration Date: \_\_\_\_\_

Return application with design drawing and specifications sheets to:  
Idaho Falls Power  
P.O Box 50220  
Idaho Falls, ID 83405  
Electronic submission can be made to: ifpinfo@ifpower.org