

DATE STAMP



**Form NC6
MICRO GENERATION
NOTIFICATION**

FOR OFFICAL USE ONLY

MWSO No.:
Planner Group:
DUOS Group:
Supplier:

Please fill in all sections in **BLOCK CAPITALS**

1. Full Name & Address

Daytime Contact: Land Line: _____ Mobile No.: _____
E-mail: _____

2. Site Address

Please provide 11 digit MPRN No.: _____
MPRN must be registered in Applicant's Name. If not please contact your supplier to change

**3. Installer / Consultant
Details:**

Daytime Contact: Land Line: _____ Mobile No.: _____
E-mail: _____

	Unit 1	Unit 2	Unit 3
4. Micro-Generation Interface Details: <i>(Please attach certified proof of EN50438 compliance)</i>			
Manufacturer			
Serial No.			
Model and Rating (Max Mec)			
Does interface have EN50438 certification?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Does interface have Irish settings installed?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

5. Micro-Generator Details:	Manufacturer			
	Serial No.			
	Model			
	Max Generation Capacity (kVA)			
	Type (Wind / Solar / Hydro / CHP)			

**6. Did you Remember
to:**

Include Type Test Certificate

Insert your MPRN Number

Fill in your MEC in Section 4.

Please return this form to:

Form NC6

ESB Networks, P.O. Box 29, Garrycastle, Athlone, Co. Westmeath

Directors: Jerry O'Sullivan Donal Flynn Des Geraghty Gina Quin John Redmond

Registered Office: Clanwilliam House, Clanwilliam Place, Dublin 2, Ireland. Registered In Ireland No. 465172