

Application for Electricity Feed-in Renewable Energy Generation scheme

Customer details

▶ Customer or business name

▶ Unit number

▶ Floor number

▶ Street number

<input type="text"/>	<input type="text"/>	<input type="text"/>
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▶ Street name

▶ Block

▶ Section

<input type="text"/>	<input type="text"/>
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▶ Suburb

▶ State

▶ Postcode

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Premium rate payment

- All systems must be approved and connected to the ActewAGL network.
- Premium rate payment is dependent on the size of the unit installed.

Customer declaration

▶ I confirm that the information I have provided in this form is true and correct. I acknowledge that my application will only be accepted upon ActewAGL Retail receiving confirmation from ActewAGL Distribution that my renewable energy generator has been approved and connected to the ActewAGL Distribution electricity network. I confirm that I have read, understood and accept the terms of the ActewAGL ACT Feed-in Tariff Retail Contract.

▶ Customer name

▶ Signature

▶ Date

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Please take a copy of the signed form for your records. Please send the signed application form to ActewAGL Retail, PO Box 250, Civic Square ACT 2608.

Office use only

▶ Received date

▶ Processed date

▶ Officer name

▶ Signature

▶ Date

<input type="text"/>	<input type="text"/>	<input type="text"/>
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