



A PHI Company

**APPLICATION FOR DELAWARE
AGGREGATED NET ENERGY METERING (ANEM) RIDER**

The Green Power Connection™ Team
Delmarva Power
A PHI Company
(866) 634-5571 - Phone
gpc-north@pepcoholdings.com

(Send applications via Email, or Mail to Delmarva Power, GPC Team)

Mailing Address: 5 Collins Drive, Mail Stop 84CP22, Carneys Point, NJ 08069

INTERCONNECTION CUSTOMER CONTACT INFORMATION



Customer Contact Information:

Customer Name: _____
Name of Legal Entity: _____
Mailing Address: _____
City: _____ State: _____ Zip Code: _____
DPL Account #: _____
Contact Person (If other than above): _____
Mailing Address (If other than above): _____
Telephone (Daytime): _____ (Evening): _____
Facsimile Number: _____ E-Mail Address (Required): _____

Alternate Contact Information:

Name: _____
Mailing Address: _____
City: _____ State: _____ Zip Code: _____
Telephone (Daytime): _____ (Evening): _____
Fax Number: _____ E-Mail Address: _____

FACILITY INFORMATION¹ (Account with Customer Owned Generation)

DPL Account #: _____
Facility Address: _____
City: _____ State: DE Zip Code: _____
Maximum Facility Output Rating: _____ kW AC
Estimated Gross Annual Energy Production: _____ kWh
Primary Source of Fuel: Solar PV, Wind, Biomass, Anaerobic Digestion, Fuel
Cells, Hydroelectric, Small Hydroelectric, Grid Integrated Electric Vehicles

DPL Interconnection Application/Agreement:

Attached Sent previously Already an Active NEM facility

¹ Host facility(s) will be the first account(s) aggregated. If more than one (1) host facility, they will be aggregated in the order you list them here. Attach additional sheets if necessary with additional facilities.

OTHER AGGREGATED ACCOUNTS²

(In the order which the customer desires to apply the credits.
Attach additional sheets as necessary. See footnote 2)



Check here if the aggregated accounts all have same Electric Supplier:
(Does not qualify for ANEM Rider if they do not have the same supplier)

Name of Electric Supplier: _____

#1

Customer Name: _____
Account #: _____ Rate Schedule: _____
Address: _____
City: _____ State: _____ Zip Code: _____

#2

Customer Name: _____
Account #: _____ Rate Schedule: _____
Address: _____
City: _____ State: _____ Zip Code: _____

#3

Customer Name: _____
Account #: _____ Rate Schedule: _____
Address: _____
City: _____ State: _____ Zip Code: _____

#4

Customer Name: _____
Account #: _____ Rate Schedule: _____
Address: _____
City: _____ State: _____ Zip Code: _____

#5

Customer Name: _____
Account #: _____ Rate Schedule: _____
Address: _____
City: _____ State: _____ Zip Code: _____

² The host facility(s) will automatically be aggregated first. There is no need to include them here. Other accounts can be in any order. Attach additional sheets if necessary with additional accounts.

#6

Customer Name: _____
Account #: _____ Rate Schedule: _____
Address: _____
City: _____ State: _____ Zip Code: _____

#7

Customer Name: _____
Account #: _____ Rate Schedule: _____
Address: _____
City: _____ State: _____ Zip Code: _____

#8

Customer Name: _____
Account #: _____ Rate Schedule: _____
Address: _____
City: _____ State: _____ Zip Code: _____

#9

Customer Name: _____
Account #: _____ Rate Schedule: _____
Address: _____
City: _____ State: _____ Zip Code: _____

#10

Customer Name: _____
Account #: _____ Rate Schedule: _____
Address: _____
City: _____ State: _____ Zip Code: _____



CUSTOMER SIGNATURE

I hereby certify that: 1) I have read and understand the Delmarva Power Aggregated Net Energy Metering Rider (“ANEM”) which can be found on DPL’s website and is a part of this Agreement; 2) I hereby agree to comply with the ANEM Rider; and 3) to the best of my knowledge, all of the information provided in this application form is complete and true. I consent to permit the PSC and Delmarva Power to exchange information regarding the generating system and customer to which this application applies.

Customer Signature: _____ Date: _____

Printed Name: _____ Title: _____

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FINAL APPROVAL FOR DPL ANEM RIDER *(for DPL use only)*

Entry in the ANEM Rider is hereby approved by Delmarva Power. The date specified here represents the date the customer was entered into the Rider.

DPL Signature: _____ Date: _____

Printed Name: _____ Title: _____