## **CERTIFICATION OF COMPLETION**

To be completed and returned to the utility when installation is complete and final electric inspector approval has been obtained. Use contact information provided on the utility's webpage for generator interconnection to obtain mailing address, facsimile number and email address.

INTERCONNECTION CUSTOMER INFORMATION							
*Owner / Company (Legal Entity Name)			*Contact Name				
*Mailing Address			*City			е	*Zip
*Phone No. (Daytime)	Phone No. (Daytime) Phone No. (Evening) Facsimil		e No. *Email Address				
INSTALLER CONTACT INFORMATION (if not owner installed)							
*Owner / Company (Legal Entity Name)			*Contact Name				
*Mailing Address			*City	*State *Zip			*Zip
*Phone No. (Daytime)	Phone No. (Evening)	Facsimile	e No.	*Email Address			
*CUSTOMER SIGNATURE							
The distributed generation facility is complete and has been approved by the local electric inspector having jurisdiction. A signed copy of the electric inspector's form indicating final approval is attached. The interconnection customer acknowledges that it shall not operate the distributed generation facility until receipt of the final acceptance and approval by the utility as provided below.							
Interconnection Customer Signature				Date			
Printed Name							
Check if a copy of the signed electric inspection form is attached.							
Check if copies of the as-built documents are attached (projects larger than 20 kVA only).							
ACCEPTANCE AND FINAL APPROVAL FOR INTERCONNECTION (for utility use only)							
The interconnection agreement is approved and the distributed generation facility is approved for interconnected operation upon the signing and return of this Certificate of Completion by utility.							
Electric Distribution Company waives Witness Test?							
If the utility performs a Witness Test as specified under lowa Utilities Commission rule 199 IAC 45.5(10), the utility may charge the interconnected customer a cost-based fee of no more than \$125.							
Witness Test fee has been paid:							
If not waived, date of successful Witness Test:							
Utility representative's Initials:							
Utility Representative's Signature				Date			
Printed Name	Title		1				