## **Emergency Backup Generator Grid Registration Form**

Owner/Entity Name	
Contact Person	
Contact Number	
Email Address	
Installation Address	
City	
State/Province	
State/Province	
Postal/Zip Code	
Generator Details	
Make & Model	
Capacity (kW)	
Fuel Type	
Fuel Type	1
Data of Commissioning	
Date of Commissioning	
Intended Purpose of Generator	
Parallel Operation with Grid	
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Additional Remarks	