



**ORILLIA POWER DISTRIBUTION CORPORATION
GENERATOR ACCOUNT SETUP FORM**

To Be Completed by All Applicants

Facility Address : _____

Registered Property Owner: _____

Account/Contract Name: _____

Name of Facility - Generator _____

HST Registrant # _____

Telephone Numbers : Business _____ Residence _____

I would like my invoices sent to the above address _____ OR C/O _____

Name (Person or Organization): _____

Mailing Address: _____ Apt/Unit No.: _____
(No.) (Street)

City/Town: _____ Postal Code: _____

Settlement of Accounts Pre-Authorized Payment Plan (PAP) is required - Pre-Authorized form will need to be completed along with void cheque or Pre-Authorized Transaction form from your bank.

MicroFIT Generation Account There is a monthly service charge that covers the cost of maintaining the meter and account.

FIT Generation Account A separate account will be set up for electricity drawn from OPDC. The appropriate general service rate will be applied to the monthly maximum demand and energy consumed by the generator.

I have read and understand the above statements and acknowledge that the information has been provided by me and is collected under the authority of the Public Utilities Act. This information will be used for establishing and maintaining an account, and for the normal business matters pertaining to this account.

Customer Signature: _____ Date: _____
dd/mmm/yy

Print first and last name: _____

For Administrative Use Only

Generation Account Type: FIT Load MicroFIT Facility Name: _____

Generator Account No: _____ Commerical Operation Date: _____

Generator Account (Load) No: _____ Commerical Operation Date: _____

Meter ID: _____ Meter Energization Date: _____

Loss Factor: _____ Primary/Secondary Metered: _____

Rate Code: _____ Contract Price: _____

Completed by: _____ Date: _____