

QUESTIONNAIRE FOR PHOTOVOLTAIC INSTALLATIONS

CUSTOMER						
COMPANY NAME:						
CONTACT DETAILS:						
Address						
ZIP						
VAT (Tax regulation No.)						
Tax Office						
Tel			Mobile			
Fax						
Email						
PHOTOVOLTAIC PA	ARK					
CONTACT DETAILS:						
Contact person						
Tel			Mobile			
Fax						
Email						
Address						
INSTALLATION'S DETAILS:						
Total Power (kW)						
Location / Area					T	
To be installed on	Industrial building's roof		Terrace \square		On the ground	
Mounting system						
Installation Slope		0				
(degrees)		0				
Orientation						
Technical characteristics:						
P/V modules						
Inverters						
Inverter's positioning	Indoors		Outdoors			
Distance from grid pillar (m)	Low voltage			Medi	um voltage	
General information and ac	cess to the photovol	taic in:	stallation:			
Type of roofing	Metal sheet		Panel		Tiles	
	Bartage					
Soil quality (for plots)	Big rocks		Little rocks		Rocky	
	Clay		Sandy		Puddle	
	Other					



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Soil Condition (for plots)	Without plants		Shrubs		Trees	
Access road	Asphalt		Dirt road		Gravel road	
Vehicle Access	Triaxial truck		Biaxial truck		Small truck	
	Other					
Area's security	Fenced		Fencing needed		Security guard	
	Offer for cameras		Offer for IR beam			
Attached documents	Topographic Plan		Ground plan		Coordinates	
	Photographs		Installation layout			
	Module's technical specifications		Approval documents		Other	
PROJECT'S DETAILS:						
Project phase	Briefing/ Information		Licensing documents editing and processing		Waiting for the license	
	Licensing process completion		Installation			
Estimated project start date	// 201					
Estimated project completion date	/ 201					
Financing	Equity capital		percentage		%	
	Bank financing		percentage		%	
Insurance	Yes		No			
Interested in installation certification	Yes		No			
					Date	
On behalf of Project Dynamic S.A.					For the custom	er