

Stand-Alone System Application

1. Concerned

Date:

Name
 Surname
 Address, Street..... Nr.
 City P.C.
 Tel. Fax
 Email

2. Installation place

House Caravan Business
 Prefecture.....
 Height
 Airy place?

3. Connection

3.1 Connected with public grid.....
 3.2 Without
 3.3 Generator.....
 Gasoline Diesel Gas
 Auto start system..... Remote control..... Power (kVA)

4. Use

4.1 Daily
 4.2 Weekend.....
 4.3 Weekend in summer.....
 4.4 Daily in summer
 4.5 Only in winter

5. Coverage

5.1 100% 50-80% backup Other.....
 5.2 Follow loads:

Nr	Load	Quantity	Volt	Power (W)	Use (hours daily)	Start (time of day)