



Republic of the Philippines
ENERGY REGULATORY COMMISSION
Market Operations Service
Licensing Division

**QE-COC Application Form No. 1.1
(Solar)**

Fill all applicable white spaces. All values in three (3) decimal places. Write N/A if not applicable.
Attach to QE-COC Form No. 1.

QUALIFIED END-USER (SOLAR GENERATION FACILITY)

Name of Owner/Company			
Name of Facility, if applicable			
Distribution Utility			
Generation Facility Address	<i>Lot/Block/Phase</i>	<i>Street Name</i>	<i>Barangay / Subdivision</i>
	<i>Municipality/City</i>	<i>Province</i>	<i>Zip Code</i>
Number of Units			

TECHNICAL SPECIFICATION – SOLAR

PARTICULARS	Unit No. __	Unit No. __	Unit No. __	Unit No. __
Installation Date ¹				
Test and Commissioning Date ²				
Economic Life				
INVERTER				
Year Manufactured				
Manufacturer				
Serial Number				
Rated Capacity (kW)				
Dependable Capacity (kW)				
Voltage (V)				
Frequency (Hz)				
MODULES / SOLAR PANEL				
Manufacturer				
No. of Solar Panels Connected				
Rated Capacity per panel (W _P)				
Aggregated Rate Capacity per Inverter (MW _P)				

Note: Please provide additional sheet(s) if necessary.

¹ Indicate Actual Date of Installation.

² Indicate Actual Date of Test and Commissioning.



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PERSON WHO PROVIDED THE ABOVE INFORMATION

Name		Designation	
Date Accomplished			
Government Issued Identification Card No.			
Date Issued		Place Issued	
Signature			



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COC Application No.:

QUALIFIED END-USER (QE) CERTIFICATE OF COMPLIANCE (COC) APPLICATION
QE-COC Application Form No. 1

Fill all applicable white spaces. Mark all appropriate boxes with an "X". Write N/A if not applicable.
Attach QE-COC Form No. 1.1.

Part I – INFORMATION OF THE APPLICANT

Name of Owner

☐ Residential

☐ Commercial

☐ Industrial

☐

Public Building /
Establishment

Complete Address

Unit/Room/Floor/Building No.

Building Name/Tower

Lot/Block/Phase

Street Name

Barangay /Subdivision

Municipality/City

Province

Zip Code

Contact Number/s

E-mail Address/es

Website (if applicable)

Name of Company (if applicable)

Name of Operator (if applicable)

Complete Office Address of
Company and/or Operator

Type of Organization

Company TIN (if applicable)

Telephone Number/s

Mobile Number/s

Fax Number/s

E-mail Address/es

Website (if applicable)

Part II – REGISTRATIONS / ACCREDITATION / COMPLIANCE CERTIFICATES

Document Issued

Reference No.

Date Issued

Validity Period

Securities and Exchange Commission (SEC)



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Part II – REGISTRATIONS / ACCREDITATION / COMPLIANCE CERTIFICATES

Document Issued	Reference No.	Date Issued	Validity Period
SEC Certificate of Registration / Certificate of Partnership ¹ , if applicable			
Articles of Incorporation (AOIs) / Articles of Partnership (AOPs) ² , if applicable			
Department of Trade and Industry (if Sole Proprietorship)			
Business Name Registration, if applicable			
Local Government Unit (LGU)			
Business Permit (BP), if applicable			
Electrical/Building Permit (for Solar PV Facility), if applicable			

Note: Please provide additional sheet(s) if necessary.

PERSON WHO PROVIDED THE ABOVE INFORMATION

Name		Designation	
Date Accomplished			
Government Issued Identification Card No.			
Date Issued		Place Issued	
Signature			

¹ Indicate ALL subsequent amendments, if any.

² *Ibid.*