

Statewide Solar For All (S-SFA) Request Form

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Please email all	inquiries and docu	ments pertaining	to NYSEG and R	G&E S-SFA to ny	rseg.rge.ssfa@nyseg.com	•
Company:	□ NYSEG □ F	G&E	9	SIR Project ID:		
Project Name:						
Developer/Owne	er:					
Authorized Agen	t (If applicable, must pr	ovide Appendix F):				
Service Address (Street, City, Zip):					
Mailing address f	or utility invoice:					
Email contact for	utility invoice:					
Email contact for	phone line/mete	r issues (maximu	um of 3):			
Email contact for	Monthly Reports	:				
Project Size (kW	AC):					
Capacity Alternat	tive Selection:	Alternative 1	☐ Alternative 2	☐ Alternat	ive 3	
The state of the s	nerating equipmen	nt with a rated ca	e a nameplate co	apacity (in kilow	00 kW atts of alternating current, or have received NY-Sun	for
Storage Informat Storage Exclusive Storage Control Storage Import Storage Default	vely Charged from s Configuration Netting Configurat	Eligible Generato	r			
*Please indicate NY-Sun Funding Category 4 Low		nding Received: _		of the following	<u>g:</u>	
Company Use Only Account Number:			t based on 25% partian):	payment date:		