

**COMMUNITY SOLAR APPLICATION**

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

SERVICE ADDRESS: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ CELL: \_\_\_\_\_

EMAIL ADDRES: 1) \_\_\_\_\_ 2) \_\_\_\_\_

*At the rate and subject to Terms and Conditions as filed from time to time with the DPU of Massachusetts, I agree to abide to grant free and easy access to said Department to read and maintain any equipment belonging to the Sterling Municipal Light Department.*

Signature: \_\_\_\_\_ Account No. \_\_\_\_\_