

**SOUTH CAROLINA ELECTRIC & GAS COMPANY**

**REQUEST FOR COMPANY TO PURCHASE FROM A QUALIFYING SMALL POWER  
PRODUCTION OR COGENERATION FACILITY**

1. NAME OF APPLICANT: \_\_\_\_\_

2. ADDRESS: \_\_\_\_\_

3. TELEPHONE NUMBER: \_\_\_\_\_

4. DESCRIPTION OF THE FACILITY:

(a) Small Power Production   
Cogeneration Facility

(b) Location of Facility:  
\_\_\_\_\_  
\_\_\_\_\_

(c) The Primary Energy Source:  
\_\_\_\_\_

(d) Maximum Power Production Capacity of the Facility (KW):  
\_\_\_\_\_

(e) Has Qualifying Status Been Applied For or Obtained Through Appropriate Regulatory Agencies?  
Yes   
No

5. APPROXIMATE DATE FACILITY WILL BE AVAILABLE FOR USE:  
\_\_\_\_\_

6. APPROXIMATE POWER AVAILABLE FOR PURCHASE:

Single Phase (KW) \_\_\_\_\_

Three Phase (KW) \_\_\_\_\_

Number of KWH's Monthly \_\_\_\_\_

Delivery Voltage \_\_\_\_\_