

Ameren Illinois
Application for Net Metering Services

(Please fill out separate applications for each proposed net metering location.)

Customer Name _____

Mailing Address _____

City _____ State _____ Zip Code _____

Daytime Phone Number _____

Address of proposed net metering location (if different from above)

City _____ Zip Code _____

Ameren Account Number: _____

Name Plate Capacity Rating of Existing/Proposed Generator: _____ kW

Has generator already been installed? Yes No

Please place a check mark next to the fuel source of the existing/proposed generator:

_____ Solar

_____ Wind

_____ Agricultural Residues

_____ Livestock Manure

_____ Landscape Trimmings

_____ Hydroelectric

_____ Untreated and Unadulterated Wood Wastes _____ Other (please specify)

_____ Dedicated Crops Grown for Electricity Production (please specify crop) _____

_____ Anaerobic Digestion of Livestock or Food Processing Waste

_____ Fuel Cell or Microturbine Powered by Renewable Fuels

For customers served under Delivery Service rate DS-1 or DS-2, please select your Annual Period Anniversary Month:

_____ April; or _____ October

Customer Signature

Date

Please mail the completed application to:

Ameren Illinois Net Metering Coordinator

10 Executive Dr – Mail Code 910

Collinsville, IL 62234

For questions regarding application contact Net Metering Coordinator at: renewablesillinois@ameren.com