

Illinois Shines Program Project Attestation

Date of Exami	nation	Project Application ID#	
Project Applic	ation Name		
Project Addres	SS		
I attest to the	following:		
1. I am a Qu	alified Person according to Title 8	3, Section 468.20 of the Illinois Administrative Code.	
	The solar installer I represent, noted below, has been designated a Certified Distributed Generation Installer by the Illinois Commerce Commission.		
3. The comp	The company noted below is the installer of record for the project referenced above.		
		ove and confirm that it has been installed according to all existing dards, utility requirements, and applicable state and local laws.	
Name			
Company / Ins	taller		
DG Installer Co	ertificate Docket Number	DG Installer Certificate Date of Approval	
Date			



