



**SELF-INSPECTION CHECKLIST**

EQUIPMENT VERIFIED

EQUIPMENT NOT VERIFIED

PROJECT: ESS-\_\_\_\_\_ INSPECTION DATE: \_\_\_\_\_

CUSTOMER NAME: \_\_\_\_\_

INSTALLER COMPANY: \_\_\_\_\_

INSPECTOR NAME: \_\_\_\_\_

**EQUIPMENT VERIFICATION**

- Battery make / model matches Incentive Application? YES  NO
- Inverter make/model matches Incentive Application? YES  NO
- Battery / Inverter power rating (kW) matches Incentive Application? YES  NO
- Battery capacity (kWh) matches Incentive Application? YES  NO

If NO to any verification questions above, explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**INSTALLATION**

- Battery operational? YES  NO
- Battery is paired with solar PV? YES  NO
- Transfer switch installed? YES  NO
- Location of battery equipment:  
 Basement  Garage  Outdoors  Living Space  Other (describe below)  
 Battery height above ground level: \_\_\_\_\_ inches -or-  Battery is in basement

Notes: \_\_\_\_\_  
\_\_\_\_\_

**REQUIRED PHOTOS**

1. Inverter and battery serial numbers
2. Battery and inverter (showing make / model and quantities)
3. Automatic Transfer Switch and Main Electrical Panel
4. Other site photos as needed (optional)