



Date Installed: _____ Customer Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Country: _____

Product:	Serial Number:
Pump:	
Controller:	
Disconnect:	
PowerPack:	

of Panels: _____ Brand of Panel: _____ Voltage: _____ Wattage: _____

Voltage	To Ground
from Panels to cutoff: _____	Leg 1: _____
from Cutoff to controller: _____	Leg2: _____
from Controller to Pump: _____	Leg 3: _____

Cable Size: _____ Pool Dimensions: _____

Installation Company

Name: _____ Company: _____

Address: _____

City: _____ State: _____ Zip: _____ Country: _____

Installer Signature: _____

Return Document to Florida Solar Pump, LLC:

1. by Mail: 1081 NW 31 Ave, A-3, Pompano Beach, FL 33069
2. by E-mail: sales@floridasolarpump.com
3. by Fax: 1-508-484-0998