

ATTACHMENT A

Application for Interconnecting a Generating Facility no Larger than 100kW

This Application is considered complete when it provides all applicable and correct information required below. Additional information to evaluate the Application may be required.

Processing Fee

A non-refundable processing fee of \$ 100.00 must accompany this Application.

Interconnection Customer

Name: _____

Contact Person: _____

Mail Address: _____

City: _____ State: _____ Zip Code: _____

Telephone (Day): _____ (Evening): _____

E-Mail Address: _____ Fax: _____

Contact (if different from Interconnection Customer)

Name: _____

Contact Person: _____

Mail Address: _____

City: _____ State: _____ Zip Code: _____

Telephone (Day): _____ (Evening): _____

E-Mail Address: _____ Fax: _____

Owner of the facility (include % ownership by any electric utility): _____

Generating Facility Information

Installation Physical Address (if different from above): _____

Briefly describe System location on property including inside/outside location, freestanding/attached, etc:

Anticipated Maximum Annual Production of Installed System: _____

Electric Service Company: **Okanogan County PUD,** PUD Account Number: _____

Prime Mover:

Photovoltaic ___ Turbine (wind/water) ___ Fuel Cell ___ Reciprocating Engine ___ Other ___

Energy Source:

Solar ___ Wind ___ Hydro ___ Biomass ___ Diesel ___ Natural Gas ___ Fuel Oil ___

Propane ___ Other (describe) _____

Year Purchased: _____ Estimated Installation Date: _____ Estimated In-Service Date: _____

Please provide complete and detailed system information for all components of the proposed generating facility and/or include copies of all owner manuals, installation manuals, specification sheets, etc. for **ALL** system components.

Generator Manufacturer: _____ Model: _____
Serial Number: _____ Max. kW Output: _____ (kW) _____ (kVA)
Voltage: _____ Frequency: _____ Phase: _____ Power Factor: _____

Inverter Manufacturer: _____ Model: _____
Serial Number: _____ Max. kW Output: _____ (kW) _____ (kVA)
Voltage: _____ Frequency: _____ Phase: _____ Power Factor: _____

Other Components (describe): _____

Manufacturer: _____ Model: _____
Serial Number: _____ Other Info: _____
Other Info: _____ Other Info: _____

Is the equipment UL1741 Listed? Yes _____ No _____

If Yes, attach manufacturer's cut-sheet showing UL1741 listing

Is the equipment IEEE 1547 listed? Yes _____ No _____

Will installation comply with the power quality standards of IEEE 519 regarding harmonic limits?

Yes ___ No ___

List components of the Generating Facility equipment package that are currently certified:

Equipment Type	Certifying Entity
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

System Designer (if applicable)

System Designer: _____

Contact Person: _____

Mail Address: _____

City: _____ State: _____ Zip Code: _____

Telephone (Day): _____ (Evening): _____

E-Mail Address: _____ Fax: _____

Installation Contractor (if applicable)

Contractor Name: _____

Contact Person: _____

Contractor License Number (L & I Registration Number): _____

Mail Address: _____

City: _____ State: _____ Zip Code: _____

Telephone (Day): _____ (Evening): _____

E-Mail Address: _____ Fax: _____

Attach to this Application a one-line electrical diagram for proposed generating facility, including metering points, in relation to Utility's electrical system and the customer's generating system.

Interconnection Customer Signature

I hereby certify that, to the best of my knowledge, the information provided in this Application is true. I agree to abide by the terms and conditions for the Interconnection Standards for Electric Generators with Generating Capacity no Larger than 100 kW and return the Certificate of Completion when the Generating Facility has been installed.

Signed: _____ Date: _____

Contingent Approval to Interconnect the Generating Facility

(For Utility use only)

Interconnection of the Generating Facility is approved contingent upon the terms and conditions for the Interconnection Standards for Electric Generators with Generating Capacity no Larger than 100 kW and return of the Certificate of Completion.

Energy Services: _____ Date: _____

Metering: _____ Date: _____

Engineer: _____ Date: _____

Application ID number: _____

Utility waives inspection/witness test? Yes _____ No _____