Attachment 2

SMALL GENERATOR INTERCONNECTION REQUEST

(Application Form)

Transmission Provider: _____

Designated Contact Person: _____

Address: _____

Telephone Number: _____

Fax: _____

E-Mail Address: _____

An Interconnection Request is considered complete when it provides all applicable and correct information required below. Per SGIP section 1.5, documentation of site control must be submitted with the Interconnection Request.

Preamble and Instructions

An Interconnection Customer who requests a Federal Energy Regulatory Commission jurisdictional interconnection must submit this Interconnection Request by hand delivery, mail, e-mail, or fax to the Transmission Provider.

Processing Fee or Deposit:

If the Interconnection Request is submitted under the Fast Track Process, the non-refundable processing fee is $500.

If the Interconnection Request is submitted under the Study Process, whether a new submission or an Interconnection Request that did not pass the Fast Track Process, the Interconnection Customer shall submit to the Transmission Provider a deposit not to exceed $1,000 towards the cost of the feasibility study.

Interconnection Customer Information

Legal Name of the Interconnection Customer (or, if an individual, individual's name)

Name: _____

Contact Person: _____

Mailing Address: _____

City:_____ State:_____ Zip: _____

Facility Location (if different from above): _____

Telephone (Day):_____Telephone (Evening): _____

Fax:_____E-Mail Address: _____

Alternative Contact Information (if different from the Interconnection Customer)

Contact Name: _____

Title: _____

Address: _____

_____

Telephone (Day):_____Telephone (Evening): _____

Fax:_____E-Mail Address: _____

Application is for: _____New Small Generating Facility
_____Capacity addition to Existing Small Generating Facility

If capacity addition to existing facility, please describe: _____
_____

Will the Small Generating Facility be used for any of the following?

Net Metering? Yes____No ____
To Supply Power to the Interconnection Customer? Yes____No ____
To Supply Power to Others? Yes_____No _____

For installations at locations with existing electric service to which the proposed Small Generating Facility will interconnect, provide:

_____ _____
(Local Electric Service Provider*) (Existing Account Number*)

[*To be provided by the Interconnection Customer if the local electric service provider is different from the Transmission Provider]

Contact Name: _____

Title: _____

Address: _____

_____

Telephone (Day):_____Telephone (Evening): _____

Fax:_____E-Mail Address: _____

Requested Point of Interconnection: _____

Interconnection Customer's Requested In-Service Date: _____

Small Generating Facility Information
Data apply only to the Small Generating Facility, not the Interconnection Facilities.

Energy Source:____Solar_____Wind__Hydro_____Hydro Type (e.g. Run-of-River):_____
Diesel____Natural Gas_____Fuel Oil____Other (state type) _____

Prime Mover:_____Fuel Cell_____Recip Engine ___Gas Turb ___Steam Turb
___Microturbine ___PV ___Other

Type of Generator:_____Synchronous ____Induction _____Inverter

Generator Nameplate Rating:_____kW (Typical) Generator Nameplate kVAR: _____

Interconnection Customer or Customer-Site Load:_____kW (if none, so state)

Typical Reactive Load (if known): _____

Maximum Physical Export Capability Requested:_____kW

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

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

Is the prime mover compatible with the certified protective relay package? _____Yes _____No

Generator (or solar collector)
Manufacturer, Model Name & Number: _____
Version Number: _____

Nameplate Output Power Rating in kW: (Summer)_____(Winter) _____

Nameplate Output Power Rating in kVA: (Summer)_____(Winter) _____

Individual Generator Power Factor
Rated Power Factor: Leading:_____Lagging:_____

Total Number of Generators in wind farm to be interconnected pursuant to this Interconnection Request:_____Elevation: _____ ___Single phase ___Three phase

Inverter Manufacturer, Model Name & Number (if used): _____

List of adjustable set points for the protective equipment or software: _____

Note: A completed Power Systems Load Flow data sheet must be supplied with the Interconnection Request.

Small Generating Facility Characteristic Data (for inverter-based machines)

Max design fault contribution current:_____ Instantaneous____or RMS? ____

Harmonics Characteristics: _____

Start-up requirements: _____

Small Generating Facility Characteristic Data (for rotating machines)

RPM Frequency: _____
(*) Neutral Grounding Resistor (If Applicable): _____

Synchronous Generators:

Direct Axis Synchronous Reactance, Xd:_____P.U.
Direct Axis Transient Reactance, X'_d:_____P.U.
Direct Axis Subtransient Reactance, X''_d:_____P.U.
Negative Sequence Reactance, X_2:_____P.U.
Zero Sequence Reactance, X_0:___P.U.
KVA Base: _____
Field Volts: _____
Field Amperes: _____

Induction Generators:

Motoring Power (kW): _____
I_2^2 t or K (Heating Time Constant): _____

Rotor Resistance, Rr:_____
Stator Resistance, Rs:_____
Stator Reactance, Xs:_____
Rotor Reactance, Xr: _____
Magnetizing Reactance, Xm: _____
Short Circuit Reactance, Xd": _____
Exciting Current: _____
Temperature Rise: _____
Frame Size:_____
Design Letter: _____
Reactive Power Required In Vars (No Load): _____
Reactive Power Required In Vars (Full Load): _____
Total Rotating Inertia, H: _____Per Unit on kVA Base

Note: Please contact the Transmission Provider prior to submitting the Interconnection Request to determine if the specified information above is required.

Excitation and Governor System Data for Synchronous Generators Only

Provide appropriate IEEE model block diagram of excitation system, governor system and power system stabilizer (PSS) in accordance with the regional reliability council criteria. A PSS may be determined to be required by applicable studies. A copy of the manufacturer's block diagram may not be substituted.

Interconnection Facilities Information

Will a transformer be used between the generator and the point of common coupling? ____Yes ____ No

Will the transformer be provided by the Interconnection Customer?_____Yes_____No

Transformer Data (If Applicable, for Interconnection Customer-Owned Transformer):

Is the transformer:_____single phase_____three phase? Size:_____kVA
Transformer Impedance:_____% on_____kVA Base

If Three Phase:
Transformer Primary: _____Volts _____ Delta _____ Wye _____ Wye Grounded
Transformer Secondary: _____Volts _____ Delta _____ Wye _____ Wye Grounded
Transformer Tertiary _____Volts _____ Delta _____ Wye _____ Wye Grounded

Transformer Fuse Data (If Applicable, for Interconnection Customer-Owned Fuse):

(Attach copy of fuse manufacturer's Minimum Melt and Total Clearing Time-Current Curves)

Manufacturer:_____Type:_____Size:_____Speed: _____

Interconnecting Circuit Breaker (if applicable):

Manufacturer:_____Type: _____
Load Rating (Amps):_____ Interrupting Rating (Amps):_____ Trip Speed (Cycles): _____

Interconnection Protective Relays (If Applicable):

If Microprocessor-Controlled:

List of Functions and Adjustable Setpoints for the protective equipment or software:

Setpoint Function	Minimum	Maximum
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____

If Discrete Components:

(Enclose Copy of any Proposed Time-Overcurrent Coordination Curves)

Manufacturer:_____Type:_____Style/Catalog No.:_____Proposed Setting: _____
Manufacturer:_____Type:_____Style/Catalog No.:_____Proposed Setting: _____
Manufacturer:_____Type:_____Style/Catalog No.:_____Proposed Setting: _____
Manufacturer:_____Type:_____Style/Catalog No.:_____Proposed Setting: _____
Manufacturer:_____Type:_____Style/Catalog No.:_____Proposed Setting: _____

Current Transformer Data (If Applicable):

(Enclose Copy of Manufacturer's Excitation and Ratio Correction Curves)

Manufacturer: _____
Type: _____ Accuracy Class: _____ Proposed Ratio Connection: _____

Manufacturer: _____
Type: _____ Accuracy Class: _____ Proposed Ratio Connection: _____

Potential Transformer Data (If Applicable):

Manufacturer: _____

Type: _____ Accuracy Class: _____ Proposed Ratio Connection: _____

Manufacturer: _____

Type: _____ Accuracy Class: _____ Proposed Ratio Connection: _____

General Information

Enclose copy of site electrical one-line diagram showing the configuration of all Small Generating Facility equipment, current and potential circuits, and protection and control schemes. This one-line diagram must be signed and stamped by a licensed Professional Engineer if the Small Generating Facility is larger than 50 kW.

Is One-Line Diagram Enclosed? ____ Yes ___ No

Enclose copy of any site documentation that indicates the precise physical location of the proposed Small Generating Facility (e.g., USGS topographic map or other diagram or documentation).

Proposed location of protective interface equipment on property (include address if different from the Interconnection Customer's address) _____

Enclose copy of any site documentation that describes and details the operation of the protection and control schemes. Is Available Documentation Enclosed? _____Yes ____ No

Enclose copies of schematic drawings for all protection and control circuits, relay current circuits, relay potential circuits, and alarm/monitoring circuits (if applicable).
Are Schematic Drawings Enclosed?_____Yes_____No

Applicant Signature

I hereby certify that, to the best of my knowledge, all the information provided in this Interconnection Request is true and correct.

For Interconnection Customer:_____Date: _____