Preliminary Consultation Information Request for Distributed Energy Resource (DER) Connections



This application is for customers applying for a Distribution Energy Resource (DER) pre-assessment. Email your completed application to **der@torontohydro.com.** If you have any questions, you can contact us at the same email address.

The applicant should only proceed with this form if the proposed DER project is not a sole emergency backup generator intended for use during a power interruption to the distribution system.

The applicant should complete the latest version of the PCIR form, and submit the form per the instruction provided on Toronto Hydro's website. All fields are required, unless otherwise noted, to enable the preliminary connection assessment. The Applicant does not need to commit to any information provided in the PCIR. Changes can be made when applying for a Connection Impact Assessment (CIA). Please note that the preliminary consultation process does not consider the full range of technical evaluations that would be performed through a CIA. The PCR provides additional information on the potential complexity of the connection of the proposed DER. Capacity is not reserved upon completion of a Preliminary Consultation Report (PCR).

Please check the Independent Electricity System Operator's (IESO) website for information on the System Impact Assessment if the applicant plans to provide ancillary services.

All kW capacity information in this form should be in AC.

Toronto Hydro contact information

Name: Toronto Hydro Electric

System Limited

Department: DER Connections

Address: 500 Commissioners St.

City/Postal code: Toronto, ON

M4M 3N7

Phone: 416-542-3099

(voicemail only)

Email: der@torontohydro.com

General

Application information		
Project name:		
Application submission date:		
Applicant information		
Applicant (company name):		
Applicant type — please select one of the following:		
DER owner Property owner / landlord / property	erty manager Consultant	
Other (please specify):		
Applicant representative (Individual name):		
Applicant address:		
City:	Postal code:	
Telephone:	Fax:	
Email:		

Project information

Project nameplate & type

Proposed capacity (ag	ggregate):			kW
Please select one of th	ne options:	Exporting	Non-expo	rting
Proposed export capa	city (aggregate)):		kW
Connection type:	Single-phase	Three-phase	e	
Please select one of th	ne options:	Inverter-based	Non-inver	ter-based
Proposed DER fuel/er	ergy type			
Please use the selection	on below to iden	tify the proposed	DER fuel/energy	/ type.
Solar		kW	Therm	alkW
Wind		kW		/ storage ng bi-directional EV)kW
Water (Hydroelectric)		kW	Other	(enter specific technology type and kW):
Biofuel/biogas		kW		kW
Existing account number				
Existing account holds	er name (if appli	cable):		
Site information				
City/town/township:				
Postal code:			SPS co-ordinate	s:
	nnection assessr			ide information required below to ensure nergy types, please explain in section
Existing DER capacity	(aggregate): _			kW
Existing DER connecti	on: Single	e-phase Thr	ee-phase	
Existing DER type:	Inverter-base	ed Non-inve	erter-based	Multiple units (provide details in PCIR section 6)
Existing DER intent:	Exporting	Non-exp	orting	Multiple units (provide details in PCIR section 6)

Other information

In the comment box below, the applicant can provide any additional information that is required as indicated in
the above section(s) or considered beneficial for the purpose of obtaining a preliminary connection assessment.

If the applicant chooses to provide accompanying documents, please list them below.

Expected monthly generation, consumption and output from the facility (optional)

Total generation (optional)

Month	kWh	Peak kW
January		
February		
March		
April		
May		
June		
July		
August		
September		
October		
November		
December		

Total internal consumption (optional)

Month	kWh	Peak kW
January		
February		
March		
April		
May		
June		
July		
August		
September		
October		
November		
December		

Total output to Toronto Hydro's distribution system (optional)

Note: The total output is the total generation minus the total internal consumption. This value would be negative when the generators are not in operation or when the internal consumption exceeds generation.

Month	kWh	Peak kW
January		
February		
March		
April		
May		
June		
July		
August		
September		
October		
November		
December		

Office use only

PCIR status		
Date received:	Date returned incomp	olete:
Date preliminary consultation rep	oort issued:	
of facilitating Distributed Energy Resource and, where applicable, the personal infor purposes. Toronto Hydro reserves the riginformation on this form, including an endisclosure of the results of the pre-assess communications to and from Toronto Hydroplicable, including but not limited to no intercepted and/or read by unintended pintercepting and/or reading this form and	tes connections. By signing this form, you a mation on this form, and are consenting to ht to verify project information directly fro gineering consultant/developer or any con sment to that party. By opting to submit the dro not being encrypted or secure, and that ame, service address, phone number, email arties. Toronto Hydro accepts no liability for	s form is being collected by Toronto Hydro for the purposes are agreeing to Toronto Hydro collecting the information its usage by Toronto Hydro for the aforementioned m the customer. By providing third party contact tact other than the customer, you are consenting to the is form, you are acknowledging that you accept the risk of at the personal information contained in this form, where address, and Toronto Hydro account number, could be or any losses and/or damages caused by unintended parties how Toronto Hydro collects, uses, and discloses personal ivacypolicy.
Customer signature		
Contain the factor of the fact		
Customer name (print)	Customer signature	Date