

FIT & MicroFIT Connection Application Form

This application form provides information required for an initial assessment of the Embedded Generation project.

Date:

(dd / mm / yyyy)

OPA FIT Project Identification Number:

1. Applicant Contact Information (whom will be contractually obligated for this generating facility)

Name:

Service Address:

Telephone:

Cell:

E-mail:

Fax:

2. Engineering Consultant (Electrical)/Developer

Company / Person:

Contact:

Address:

Telephone:

Cell:

E-mail:

Fax:

3. Project Description:

Dates: Proposed Start of Construction: (dd/mm/yyyy)

Proposed In-Service: (dd/mm/yyyy)

Size: Output voltage: V

Number of Phases: one three

Number of Units:

Rating of Each Unit: kW

Proposed Total Capacity: kW

Proposed Total Capacity, Future: kW

Generator Type: Synchronous Induction Inverter

Other, please specify:

Manufacturer:

Model Number:

Mode of Operation:

Load Displacement? Yes No

If Yes, existing load kW, new load kW

Power Export? Yes No kW

Peak Period Only? Yes No kW

Proposed Connection Method:

Directly Connected Indirectly Connected (Parallel)

Load Embedded (Series)

4. Project Type:

Solar Photovoltaic Wind Bio-gas

Renewable Biomass Landfill Gas

Other, please specify:

5. Single Line Diagram (SLD)

Provide a preliminary Single Line Diagram (SLD) of generation facility showing the interface point to the distribution system. The SLD should include the required disconnecting device and show various equipment and ratings such as generators, transformers, cables, protective relays / devices, metering, synchronizing etc.

Note: If the project includes upgrades to existing EG facilities, show the existing and new electrical equipment.

SLD Drawing Number: _____, Rev.:

6. Is the Generation Facility financed by a lender? Yes No

7. Other Relevant Information:

8. Customer Signature:

Date: