



LEVELS 2 AND 3 INTERCONNECTION REQUEST FORM FOR SMALL GENERATING FACILITY

Section 1. Interconnection Customer Information

Name: _____
 Contact person: _____
 Mailing address: _____
 City, State, Zip: _____
 Telephone (Day): _____ (Evening): _____
 Fax: _____ Email: _____
 Alternative contact information
 Contact Name: _____
 Title: _____
 Mailing Address: _____
 City, State, Zip: _____
 Telephone (Day): _____ (Evening): _____
 Fax: _____ Email: _____

Application is for: New Small Generating Facility _____ Capacity addition _____
 If capacity addition to existing facility, please describe:

The Small Generating Facility will supply: Interconnection Customer ___ Others ___
 Point of Interconnection: _____
 Interconnection Customer's requested in-service date: _____

This Interconnection Request Form is considered complete when the Interconnection Customer provides all applicable and correct information required in this Schedule 6 and complies with the processing fee in Section 2 of this Schedule.

An Interconnection Customer who requests a commission jurisdictional interconnection must submit this Interconnection Request Form by hand delivery, mail, email, or fax to the utility.

Request for:

Level 2 Process _____
 Level 3 Process _____
 Standby Generator / Closed Transition _____

Section 2. Processing Fee and Deposit

If the interconnection request is submitted as Level 2, the nonrefundable processing fee payable to the utility is \$1,000.

If the interconnection request is submitted as Level 3, the IC shall submit to the utility a nonrefundable processing fee of \$1,000. Upon being designated by the Utility as a Project A or if the IC elects to proceed with the Project B, Level 3 Interconnection Customers shall also be obligated to submit an interconnection request study deposit of \$10,000 plus \$1.00 per kWAC.

An IC transferring from the Level 1 process shall pay the nonrefundable processing fee of \$1,000 minus any previously paid Level 1 processing fee.

An IC transferring from the Level 2 to the Level 3 process shall not be required to pay an additional \$1,000 processing fee.

If the SGF is a standby generating facility, the interconnection request shall be designated a Project A and the IC shall be obligated to submit an interconnection request study deposit of \$5,000 in conjunction with the initial study agreement as provided for in 20VAC5-314-38 and 20VAC5-314-70.

If the interconnection request is submitted solely due to a transfer of ownership or change of control of the SGF, the nonrefundable processing fee is \$500.

Section 3. Small Generating Facility Information

Data apply only to the small generating facility, not the interconnection facilities.

SGF Location (if different from information listed in Section 1 of this Schedule):

Site Address: _____

City, State, Zip: _____

Utility and Account Number: _____

Energy Service Provider and Account Number: _____

If not available prior to the completion of the Interconnection Request Form, the Interconnection Customer must provide an address for SGF that has been issued conforming to the 911 emergency response group for the area to the utility within 15 business days of issuance.

Primary energy source

Choose one:

| Renewable | Nonrenewable |
|---|--|
| <input type="checkbox"/> Solar – Photovoltaic <input type="checkbox"/> Solar – Thermal <input type="checkbox"/> Biomass – Landfill Gas <input type="checkbox"/> Biomass – Manure DigesterGas <input type="checkbox"/> Biomass – Directed Biogas <input type="checkbox"/> Biomass – Solid Waste <input type="checkbox"/> Biomass – Sewage Digester Gas <input type="checkbox"/> Biomass – Wood <input type="checkbox"/> Biomass – Other (please specify) <input type="checkbox"/> Hydro Power – Run of River <input type="checkbox"/> Hydro Power – Storage <input type="checkbox"/> HydroPower – Tidal <input type="checkbox"/> Hydro Power – Wave <input type="checkbox"/> Wind <input type="checkbox"/> Geothermal <input type="checkbox"/> Battery <input type="checkbox"/> Other (please specify) | <input type="checkbox"/> Fossil Fuel – Diesel <input type="checkbox"/> Fossil Fuel – Natural Gas (not waste) <input type="checkbox"/> Fossil Fuel – Oil <input type="checkbox"/> Fossil Fuel – Coal <input type="checkbox"/> Fossil Fuel – Other (please specify) <input type="checkbox"/> Other (please specify) |

Prime mover

Choose one:

| | |
|---|--|
| <input type="checkbox"/> Photovoltaic (PV) <input type="checkbox"/> Fuel Cell <input type="checkbox"/> Reciprocating Engine <input type="checkbox"/> Gas Turbine | <input type="checkbox"/> Steam Turbine <input type="checkbox"/> Micro-Turbine <input type="checkbox"/> Other, including Combined Heat and Power (please specify) |
|---|--|

Type of generator

Choose one:

| | |
|--|--|
| <input type="checkbox"/> Inverter-Based Machine <input type="checkbox"/> Induction <input type="checkbox"/> Synchronous <input type="checkbox"/> Other (please specify) | |
|--|--|

Additional comments

Is the SGF located in utility's service area? Yes __ No __

If no, please provide name of local provider: _____

Generator nameplate rating: _____ kW _____ kVAR

Interconnection customer or customer-site load: _____ kW

Typical reactive load: _____

Maximum generating capacity requested: _____ kW_{AC}

List components of the small generating facility equipment package that are currently certified:

Equipment

Certifying Entity

1. _____
2. _____
3. _____
4. _____
5. _____

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, and 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, and Number: _____

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, X_d : _____ 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^2t or K (Heating Time Constant): _____Rotor Resistance, R_r : _____Stator Resistance, R_s : _____Stator Reactance, X_s : _____Rotor Reactance, X_r : _____Magnetizing Reactance, X_m : _____Short Circuit Reactance, X_d : _____

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

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.

Section 4. Customer's Interconnection Facilities Information

Will a transformer be used between the generator and the point of interconnection?

Yes _____ No _____

Will the transformer be provided by the IC? Yes _____ No _____

Transformer Data (If applicable, for IC-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 IC-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:

Manufacturer: _____ Type: _____

Model No. _____ Firmware ID: _____ Instruction Book No. _____

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: _____

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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: _____

Section 5. General Information

Enclose a copy of the site electrical one-line diagram showing the configuration of the small generating facility equipment, current and potential circuits, and protection and control schemes.

Enclose a copy of any site documentation that indicates the precise physical location of the proposed SGF (e.g., United States Geological Survey topographic map or other diagram or documentation).

Describe the proposed location of the protective interface equipment on the property: _____

Enclose a 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 or monitoring circuits (if applicable).

Are schematic drawings enclosed? Yes _____ No _____

Section 6. Site Control

Enclose a copy of the site control documentation. Any information appearing in public records may not be labeled confidential. (Confidential information is discussed in 20VAC5-314-110.) Site control may be demonstrated through:

1. Ownership of, a leasehold interest in, or a right to develop a site for the purpose of constructing the SGF;
2. An option to purchase or acquire a leasehold interest in a site for such purpose;
3. An exclusive or other business relationship between the IC and the entity having the right to sell, lease, or grant the IC the right to possess or occupy a site for such purpose; or
4. An existing permanent service metered account with the utility at the site and in the name of the IC.

Section 7. Interconnection Customer Signature

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

Signature: _____ Date: _____

Section 8. Utility Acknowledgment of Receipt

Signed: _____

Title: _____

Utility: _____

Date: _____

Utility signature signifies only receipt of this form, in compliance with 20VAC5-314-50.