

Application for Net Metering Facility Interconnection

(For an inverter-based net metering generation facility of 25 kW AC or less)

Applicant contact Information:

Name: _____

Company Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Telephone (daytime): _____ (Evening): _____

Facsimile Number: _____ E-mail address: _____

System Installer:

Name: _____

Company Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Telephone (daytime): _____ (Evening): _____

Facsimile Number: _____ E-mail address: _____

Facility Information:

Location (if different from above): _____

BLEC Account Number: _____

Inverter Manufacturer: _____ Model: _____

Generation Nameplate Capacity: _____ (kW) _____ (kVa) _____

Inverter Electrical Connection: _____ (AC volts), Phase: Single _____ Three _____

System Design Capacity: _____ (kW) _____ (kVa)

Prime Mover: Photovoltaic _____ Reciprocating Engine _____ Fuel Cell _____

Turbine _____ Other _____

Energy Source: Solar _____ Wind _____ Hydro _____ Diesel _____

Natural Gas _____ Fuel Oil _____ Other _____

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(continued)**

Lab Certification - - attach manufacturer's cut sheet showing listing and label information from the appropriate nationally recognized testing and certification laboratory, e.g. UL 1741 listing.

Estimated Commissioning Date: _____

Applicant Signature:

I hereby attest that the information submitted on this Application is accurate to the best of my knowledge.

(Applicant Signature)

Title

Date

Interconnection Request Acknowledgement:

Receipt of a completed Application is hereby acknowledged.

Approval for a Net Metering Facility interconnection is contingent upon the Applicant's Generator Facility conforming with the Net Metering Rules and the Agreement for Net Metering and Interconnection Services and is not granted by the Utility's signature on this Application Form. The applicant will be notified within ten (10) business days of receipt of this acknowledgment whether the interconnection application will be approved or denied.

BLEC Representative Signature: _____

Printed Name: _____

Title: _____

Date: _____

The utility shall retain a copy of this completed and signed form and return the original and any attachments to the Applicant.