

# Distributed Generation Application (20kW<sub>ac</sub> or less)

## Cooperative

## Applicant

Name & Address

**Price Electric Cooperative**  
**PO Box 110**  
**W6803 Springs Drive**  
**Phillips, WI 54555**

Name & Mailing Address

### 1. Contact Information –

*The applicant is the party that is legally responsible for the Distributed Generation (DG) system*

Applicant's Last Name:

First Name:

Middle Initial:

Applicant's Service Address (proposed location of the DG facility):

Latitude - Longitude: (i.e., 49° 32' 06" N -- 91° 64' 18" W) -- optional

County

Applicant's Phone Number:

Email Address:

### Emergency Contact Numbers

Responsible Party's Day Phone

Responsible Party's Evening Phone

Responsible Party's Weekend Phone

### 2. Electric Service Account

### 3. Applicant's Ownership Interest in the DG System

Owner  Co-Owner  Lease  Other \_\_\_\_\_

### 4. Primary Intent of the DG System

Onsite use of power, and/or net energy billing  Commercial power sales

### 5. Electricity Use, Production and Purchases

(a) Anticipated annual electricity consumption of the facility or site:

\_\_\_\_\_ (kWh)/yr.

(b) Anticipated annual electricity production of the DG system:

\_\_\_\_\_ (kWh)/yr.

(c) Anticipated annual electricity purchases [(a) minus (b)]:

\_\_\_\_\_ (kWh)/yr. \*

\* Value will be negative if there are net sales to the Cooperative

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**6. Installing Contractor Information**

Contractor's Last Name:

First Name:

Middle Initial:

Name of Company:

Contractor's Phone Number:

 (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Email Address:

Contractor's Mailing Address:

  
  
  

**7. Requested In-Service Date**

**7a. Cost of the System**

 \$

**8. Provide One-Line Schematic Diagram of the System:**

Schematic is Attached

Number of Pages Attached:

**9. Generator/Inverter Information**

Manufacturer:

Model Number:

Version Number:

Serial Number:

**Electrical Service (check one):**

Single Phase  Three Phase

**Generation Type (check one):**

Synchronous  Induction  Inverter  Other: \_\_\_\_\_

**Total Name Plate AC/DC Ratings (fill out all fields):**

 kW<sub>ac</sub>  kW<sub>dc</sub>  Volts

**Primary Energy Source (check one):**

Wind  Solar  Biomass  Manure Digester  Landfill Gas  Other \_\_\_\_\_

**Note: If there is more than one generator and/or inverter, attach an additional sheet describing each.**

**9a. Energy Storage System (ESS) Information**

ESS being installed?  Yes  No

ESS Size:  Amp/hour      Number of Batteries:       Battery Voltage (DC):

ESS Voltage (DC):       ESS purpose?  Only backup  Other

**NOTE: See PEC Distributed Generation (DG) with Optional Energy Storage Systems Requirements document for specific requirements.**

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**10. Site Plan Showing Location of the External Disconnect Switch (attach additional sheets as needed)**

**11. Liability Insurance**

Carrier:

Limits:

Agent Name:

Phone Number:

(    )    -

The Applicant, (Site Owner or Operator, if different) shall provide a Certificate of Insurance, both demonstrating that this liability insurance is in place.

**12. Design Requirements-See attached Operational Standards**

- a. Has the proposed distributed generation paralleling equipment been certified?  Yes  No
- b. If not certified, does the proposed distributed generator meet the operating limits defined in the attached Cooperative Operational Standards?  Yes  No

For items 12(a) and 12(b), if your answer is yes, please provide details (e.g., copies of manufacturer's specifications). If you do not know the answer, it is recommended you contact the equipment manufacturer for the answer and provide the same with the completed application.

**13. Other Comments, Specification and Exceptions (attach additional sheets if needed)**

**14. Applicant and Installer Signature**

To the best of my knowledge, all the information provided in this Application Form is complete and correct.

Applicant Signature:

Date:

Contractor Signature:

Date: