



**Interconnection Application
For Qualifying Facilities 25kW or Smaller**

A. System Owner Information

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Service Address: _____

Phone: _____ Email: _____

Account No. (from SECPA bill): _____

B. System Information

Location (if different from above): _____

Designed Capacity: Solar _____ Wind _____ Other _____

Tracker Description if Applicable: _____

Battery Bank Size if Applicable: _____

Inverter Manufacturer: _____ Inverter Model: _____

Inverter Nameplate Rating: _____ Single Phase Three Phase

DC Disconnect Switch AC Disconnect Switch

Disconnect Location: _____

Prime Mover: Photovoltaic Reciprocating Engine Fuel Cell

Turbine Other _____

Energy Source: Solar Wind Hydro Diesel Natural Gas

Fuel Oil Other (describe) _____

Is the equipment UL1741 Listed and Utility Interactive? Yes No

Estimated Install Date: _____ Estimated In-Service Date: _____

C. Interconnection Customer Acknowledgement

I hereby certify that, to the best of my knowledge, the information provided in this Application is true. I agree to abide by the Interconnection Standards for Cogenerators and Small Power Producers and return the Certificate of Completion when the Qualifying Facility has been installed.

Signed (System Owner): _____ Date: _____

D. Utility Approval

Interconnection of the above mention Qualifying Facility is approved contingent upon the Interconnection Standards for Cogenerators and Small Power Producers, the return of the Certificate of Completion, and SECPA inspection once completed.

Signed (SECPA Rep.): _____ Date: _____

Application ID number: _____