

# SCEC Distributed Generation Application Form

(Generation up to 15 MW)

## INSTRUCTIONS

SUBMIT THIS FORM DIRECTLY TO YOUR ELECTRIC PROVIDER

This application form is for interconnection to the electric distribution system of distributed generation systems sized up to 15 megawatts (MW) alternating current (AC) and associated equipment in compliance with Wisconsin Administrative Code Chapter PSC

For distributed generation systems that are DC rated, please use the conversion factor to determine the AC nameplate rating of the system.

If a distributed generation system already has an interconnection agreement but has simply changed ownership, do not fill out this form. Fill out Form, "Change of Ownership Form for Distributed Generation Equipment."

This form is for generation systems that will operate in parallel with the distribution grid. *If the system you are considering will operate only in isolation from the electric distribution grid, you do not need to fill out this form.*

If this generation system is planned in conjunction with construction of a new building, provide the current owner/builder's information as the Applicant, and have the new home/building purchaser fill out a "Change of Ownership" Form upon completion of sale.

<a href="#">FEES: Table</a>				
Category	Generation Capacity (AC)	Application Review Fee	Engineering Review Fee	Distribution System Study Fee
1	20 kW or less	None	Cost based	None
2	Greater than 20 kW to 200 kW	\$250	Cost based	Cost Based
3	Greater than 200 kW to 1 MW	\$500	Cost based	Cost based
4	Greater than 1 MW to 15 MW	\$1000	Cost based	Cost based

An applicant seeking to interconnect a distributed generation facility to the distribution system of a public utility shall maintain liability insurance equal to or greater than the amounts stipulated in Table 119.05-1, per occurrence, or prove financial responsibility by another means mutually agreeable to the applicant and the public utility.

<a href="#">INSURANCE REQUIREMENTS</a>		
Category	Generation Capacity (AC)	Minimum Liability Insurance Coverage
1	20 kW or less	\$300,000
2	Greater than 20 kW to 200 kW	\$1,000,000
3	Greater than 200 kW to 1 MW	\$2,000,000
4	Greater than 1 MW to 15 MW	Negotiated

## NAME AND ADDRESS OF ELECTRIC SERVICE PROVIDER

NAME \_\_\_\_\_ MAILING ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_ EMAIL \_\_\_\_\_

## SIZE CATEGORY APPLICABLE TO THIS APPLICATION

- Category 1 (20 kW or less)
  Category 2 (Greater than 20 kW to 200 kW)
- Category 3 (Greater than 200 kW to 1 MW)
  Category 4 (Greater than 1 MW to 15 MW)

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## 1. APPLICANT CONTACT INFORMATION

“Applicant” means the legally responsible person applying to a public utility to interconnect a distributed generation facility to the public utility’s distribution system. The applicant is typically the holder of the Electric Service Account.

LAST NAME	FIRST NAME	MIDDLE NAME	
COMPANY (IF APPLICABLE)	REPRESENTATIVE (IF APPLICABLE)	TITLE	
STREET ADDRESS	CITY	STATE	COUNTY
PRIMARY PHONE NUMBER	ADDITIONAL EMERGENCY PHONE	EMAIL ADDRESS	

## 2. LOCATION OF THE GENERATION SYSTEM

SAME AS APPLICANT ADDRESS ABOVE

STREET ADDRESS (IF DIFFERENT)	CITY	STATE	ZIP CODE
PRIMARY PHONE NUMBER	ADDITIONAL EMERGENCY PHONE	ELECTRIC SERVICE ACCOUNT NUMBER	
METER NUMBER	LATITUDE – LONGITUDE (OPTIONAL)	COUNTY	

Does this application relate to a change or modification of an existing system?  
If there is already generation at the point of interconnection, this is a modification.

Yes, this is a modification  No, there is no generation currently at this point of interconnection

## 3. CUSTOMER TYPE

Residential  Farm  Commercial  Industrial  Independent Power Producer  
 Other \_\_\_\_\_

## 4. APPLICANT’S OWNERSHIP INTEREST IN THE GENERATION SYSTEM

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

## 5. TYPE OF GENERATION SYSTEM

Solar PV  Wind  Hydropower  Biomass  Storage  
 Other \_\_\_\_\_

Fill out appropriate technology-based attachment.

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## 6. PRIMARY INTENTION OF GENERATION SYSTEM

- Net Billing     Certified Qualifying Facility under PURPA (Public Utility Regulatory Policies Act of 1978)     Offset load, non-export of power  
 Other on-site use or sale of power (describe) \_\_\_\_\_

## 7. TYPE OF INTERCONNECTION

- Parallel Operation (operation for more than 100 milliseconds while connected to the distribution system)  
 Momentary parallel operation (less than or equal to 100 millisecond connection), or isolated operation / open transition  
\*Per Instructions on page 1, an application is not needed if the connection to the utility system is less than or equal to 100 milliseconds

## 8. ELECTRICITY USE, PRODUCTION, AND PURCHASES

- a. Anticipated annual electricity consumption of the facility or site: \_\_\_\_\_ kWh/yr  
b. Anticipated annual electricity production of the generation system: \_\_\_\_\_ kWh/yr  
c. Anticipated annual electricity purchases from electric utility (a – b): \_\_\_\_\_ kWh/yr\*

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

## 9. PROJECT DESIGN AND ENGINEERING

COMPANY \_\_\_\_\_

REPRESENTATIVE \_\_\_\_\_

TITLE \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

## 10. INSTALLING CONTRACTOR INFORMATION (IF KNOWN)

SAME AS PROJECT DESIGN & ENGINEERING ABOVE

COMPANY \_\_\_\_\_

ELECTRICAL CONTRACTOR'S LICENSE NUMBER \_\_\_\_\_

REPRESENTATIVE \_\_\_\_\_

TITLE \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

## 11. ESTIMATED CONSTRUCTION START DATE

## REQUESTED IN-SERVICE DATE

MM / DD / YYYY \_\_\_\_\_

MM / DD / YYYY \_\_\_\_\_

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## 12. LIABILITY INSURANCE

CARRIER

LIMITS

AGENT NAME

PHONE NUMBER

EMAIL ADDRESS

Self-insured (e.g., if a local unit of government)

Other form of financial responsibility (please describe)

Note: Applicant must also provide proof of insurance as an attachment.

Note: See Minimum Coverage under Wis. Admin. Code PSC [119.05-1](#).

Note: If this is new construction, provide the current owner/builder's insurance information, and have the new home/building purchaser fill out a "Change of Ownership" Form upon completion of sale.

## 13. DESIGN REQUIREMENTS

a) Has the proposed paralleling equipment (such as an inverter) been certified by a nationally recognized testing laboratory (e.g. UL 1741)?

Yes  No

b) If certified, list the applicable certifications (e.g. UL 1741)

Not Applicable

c) If not certified, does the proposed distributed generator meet the requirements defined in Wis. Admin. Code chapter PSC 119.27?

Yes  No

## 14. REQUIRED ATTACHMENTS

a) Technology-based attachment(s) and related manufacturer specification data sheets

b) One-line Schematic Diagram of the System that includes the distributed generation equipment, interconnection disconnect switch (if required), point of interconnection, meter(s), protection equipment and associated instrumentations

c) Site plan showing major equipment, electric service entrance, electric meter(s), location of distributed generation and interface equipment, protection equipment, location of disconnect switch (if required), adjoining street name, and street address of the distributed generation system.

d) Proof of insurance per Section 12

e) Proof of equipment certification or other compliance with requirements described in Section 13

## 15. APPLICANT AND DESIGNER/ENGINEER SIGNATURE

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

APPLICANT SIGNATURE (LISTED IN SECTION 1)

DATE

PROJECT DESIGNER/ENGINEER SIGNATURE

DATE