

Application for Community Solar Project Interconnection Tier 2, Tier 3 or Tier 4 Interconnection (For Community Solar Projects with Electric Nameplate Capacities of 3 MW and less)

Applicant Contact Information :

Name:		1	· · · · · · · · · · · · · · · · · · ·	_
Mailing Address:				_
City:	State:		Zip Code:	_
Telephone (Daytime):	(Evening):			_
Facsimile Number:	E-Mail Ad	dress:		_
Address of Customer Facility W (if different from above) Street Address:				<u>ected :</u>
City:	State:		_ Zip Code:	-
System Installer/Consulting Eng	lineer :			
Name:				_
Mailing Address:				_
City:				_
Telephone (Daytime):	(Evening):			_
Facsimile Number:	E-Mail Ad	dress:		-
Electric Service Information for	Applicant's Facil	ity Where Ge	nerator Will Be Inte	erconnected :
Capacity:(Amps) Vo	oltage:	_(Volts)		
Type of Service: Single Phase	Three Phase	se		
Will a transformer be used betwee	n the generator a	nd the point of	interconnection?	_YesNo
Transformer Data (If Applicable,	for Interconnect	ion Custome	r-Owned Transform	ner):
Is the transformer:single pha				
Transformer Impedance:	% on	_kVA Base		
If Three Phase:				
Transformer Primary: Vo	lts Delta	Wye	Wye Grounded	
Transformer Secondary: Vo	olts Delta _	Wye	Wye Grounded	
Transformer Tertiary: Vo	lts Delta	Wye	_ Wye Grounded	



Requested Procedure Under Which to Evaluate Interconnection Request¹:

Please indicate below which review procedure applies to the interconnection request.

- **Tier 2** Certified interconnection equipment with an aggregate Electric Nameplate Capacity of 2 MW or less. Indicate type of certification below. <u>The application fee amount is \$500.</u>
 - □ <u>Lab Tested</u> tested to IEEE 1547.1 and other specified standards by a nationally recognized testing laboratory and is appropriately labeled.
 - ☐ <u>Field Tested</u> an identical small generator facility has been approved by an Oregon utility under a Tier 4 study review process within the prior 36 months of the date of this interconnection request.
- ☐ Tier 4 Electric Nameplate Capacity rating is 3 MW or smaller and the Community Solar Project does not qualify for a Tier 1, Tier 2 or Tier 3 review or has been reviewed but not approved under a Tier 1, Tier 2 or Tier 3 review. <u>Application fee amount is \$1000</u>.

¹ <u>Note:</u> Descriptions for interconnection review categories do not list all criteria that must be satisfied. For a complete list of criteria, please refer to PUC Rule OAR 860, Division 082, (Rule).

Field Tested Equipment:

If the field tested equipment box is checked above, please include with the completed application the following information which will be required for review of Tier 2 field tested small generator facilities:

- A copy of the Certificate of Completion, signed by an Oregon utility that has approved an identical small generator facility for parallel operation.
- A copy of all documentation submitted to the Oregon utility that approved the Small Generator Facility for parallel operation under a Tier 4 study process.
- A written statement by the Applicant indicating that the small generator facility being proposed is identical, except for Minor Equipment Modification, to the one previously approved by an Oregon utility for parallel operation.
- If a Tier 2 Application, utilizing Field Tested equipment, is proposed the remainder of the application will not be required to be completed.

Community Solar Project Information:

List interconnection components/system(s) to be used in the Community Solar Project that <u>is</u> lab certified (required for Lab Tested, Tier 2 Interconnection requests only).



1.__

Component/System

NRTL Providing Label & Listing

2	
3	
4	
5	
Please provide copies of manufacturer brochures or technical specifications	
Energy Production Equipment/Inverter Information:	
Synchronous Induction Inverter Other	
Electric Nameplate Rating: kW kVA	
Rated Voltage:Volts	
Rated Current:Amps	
System Type Tested (Total System): Yes No; (attach product literature) Customer-Site Load: (kW) (if none, so state)	
Maximum Physical Export Capability Requested: (kW)	
Individual Generator Power Factor	
Rated Power Factor: Leading:Lagging:	
Inverter Information: Manufacturer: Model:	
Type: Sorced Commutated Science Line Commutated	
Electric Nameplate Capacity Rated Output: Amps Volts	kW
Efficiency:% Power Factor:%	
DC Source: Electric Nameplate Capacity Rating: kW Rating: k	-\/Δ
Rated Voltage:Volts	
Open Circuit Voltage (If applicable):Volts	
Rated Current:Amps	
Short Circuit Current (If applicable):Amps	
Other Facility Information: Is Facility a QF? Yes No	
If yes, has Applicant completed FERC "Notice of Self Certification"? Yes No	
One Line Diagram attached: 🗌 Yes 🗌 No	
Plot Plan attached: 🗌 Yes 📋 No	
Installation Test Plan attached: 🗌 Yes 📄 No Estimated Commissioning Date (if known):	



Community Solar Project Interconnection Application

Form 2

Enclose copy of site electrical one-line diagram showing the configuration of all Community Solar Project equipment, current and potential circuits, and protection and control schemes.

Enclose copy of any site documentation that indicates the precise physical location of the proposed Community Solar Project (<u>e.g.</u>, USGS topographic map, distance from public utility facility number, other diagram or documentation).

Enclose copy of any documents that provide proof of site control.

Applicant Signature:

I hereby certify that all of the information provided in this application request form is correct.

Applicant Signature: _____

Title: _

_____Date:_____

An application fee is required before the application can be processed. Please verify that the appropriate fee is included with the application:

Application fee included

Amount_____

Public Utility Acknowledgement:

I hereby acknowledge the receipt of an Interconnection Request and Application Fee,

Approval for a Tier 2 or Tier 4 Community Solar Project interconnection is contingent upon the Applicant's Community Solar Project passing the screens and completing the review process set forth in the PUC rules found in OAR 860, Division 082 and 088 and is not granted by the Public Utility's signature on this Application Form.

Public Utility Signature: _____ Date: _____

Printed Name:_____Title:_____Title:_____

Note: The Public Utility shall retain a copy of this completed and signed form and return the original and any attachments to the Applicant.