

REC Aggregator Portal

New Users [CLICK HERE](#) to setup your account for this form. Creating an account enables you to partially complete the form and return later to finish it or to make changes after the form is submitted. Be sure to create your account **BEFORE** entering information into the form, or the information will be lost.

Existing Users [CLICK HERE](#)

Basic Information

Who is submitting this request?

Aggregator

Aggregator Batch Number

KE052516

Are you registered in NH

- Yes
- No

Aggregator name

Knollwood Energy

NH Reg #

Aggregator Email

karenton@knollwoodenergy.com

Other Aggregator name

Other aggregator email address

Facility Name

Facility Owner Name

Jim Siwik

Facility Owner email

jimsolar@siwik.org

Owner Phone

603-889-5388

Facility Address

28 Seaverns Bridge Rd

Facility Town/City

Amherst

Facility State

NH

Facility Zip

03031

Is the facility address the same as the owner's mailing address

- Yes
 No

Mailing Address

Mailing Town/City

Mailing State

Mailing Zip

Primary Contact

Karen Tenneson

Primary Contact

Facility Primary Contact

karenton@knollwoodenergy.com

Other Email Address

Facility Information

Class

Utility

Other Utility Name

To obtain a GIS ID contact:

James Webb

408 517 2174

jwebb@apx.com

GIS ID (include "NON")

Date of Initial Operation

Facility Operator Name, if applicable

Panel Make #1

Panel Model

Panel Quantity

Panel Rated Output

More Panel types?

- No
- Yes

Panel Make #2

Panel Model

Panel Quantity

Panel Rated Output

More Panel types?

- No
- Yes

Panel Make #3

Panel Model

Panel Quantity

Panel Rated Output

System capacity based on panels

Inverter Make

Inverter Quantity

Add'l Inverter Quantity

Additional Inverter Make

Rated Output - Primary Inverter

250

Rated Output - Additional Inverter

System capacity based on single inverter make

7000

System capacity based on two inverter types

System capacity in kW as stated on the interconnection agreement

7.98

Revenue Grade Meter Make

Revenue Grade GIS Approved Meter

GE

Other Meter Name

Was this facility installed directly by the customer (no electrician involved)?

- Yes
 No

Electrician Name & Number

Richard Boddei 10770M

Other Electrician Name & Number

Installation Company

Sun Dial Solar

Other Installation Company Name

Other Inst. Company Address

Other Inst. Company City

Other Inst. Company State

Other Inst. Company Zip

Equipment Vendor Company Name

Independent Monitor Name & Company

Other Monitor Name and Company

Is the installer also the equipment supplier?

- Yes
 No

Equipment Vendor

Please attach your completed interconnection agreement including Exhibit B.

The project described in this application will meet the metering requirements of PUC 2506 including:

Electricity generation in megawatt hours shall be reported to the GIS quarterly with a statement that the submission is accurate by the owner of the source, the independent monitor or a designated representative.

A revenue quality meter (meeting ANSI C-12.1-2008 for installations up to and including 10 kW, or ANSI C12.16 or better for installations greater than 10kW up to 1 mW) is used to measure the electricity generated.

The facility owner has certified to the independent monitor that the meter operates according to manufacturing standards.

The meter shall be maintained according to the manufacturer's recommendations.

The project is installed and operating in conformance with applicable building codes.

A copy of the facility's interconnection agreement is attached.

Please attach additional document here

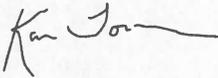
https://fs30.formsite.com/jan1947/files/f-5-168-6865661_MOljWOr5_Jim_Siwik_contract_part_3_-_sign

Please attach additional document here

https://fs30.formsite.com/jan1947/files/f-5-173-6865661_pS2MwhMS_Jim_Siwic_SPIA.pdf

Aggregator statement of accuracy

Sign your name using a mouse or, if you are using a touch-screen device, a stylus or other pointer.



Print Name

Karen Tonnesen

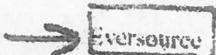
Date Signed

05/25/2016

RECEIVED

MAY 16 2016

SESD



Interconnection Standards For Inverters Sized Up To 100 kVA
Exhibit B - Certificate of Completion for Simplified Process Interconnections

Installation Information:

Check if owner-installed

Customer or Company Name (print): ~~SUNNYSIDE SOLAR~~ JAMES SIWIK

Contact Person, if Company: ~~ALAN~~ ALAN

Mailing Address: ~~94 Hillside Rd~~ 28 SEAVERNS BRIDGE RD

City: ~~CHICHESTER~~ MERRIMACK State: NH Zip Code: ~~03275~~ 03054

Telephone (Daytime): ~~603-941-0055~~ 603-889-5388 (Evening): _____

Facsimile Number: _____ E-Mail Address: SIMSOLAR@SIWIK.ORG
FJAT@SUNNYSIDESOLAR.NH.COM

Facility Information: →

Eversource Meter # 570938795

Address of Facility (if different from above): 28 SEAVERNS BRIDGE RD

City: MERRIMACK State: NH Zip Code: 03054

X **Electrical Contractor Contact Information:**

Electrical Contractor's Name (if appropriate): RICHARD BOODIE

Mailing Address: 92 OLD TOWN RD.

City: FASSETT State: NH Zip Code: 03234

Telephone (Daytime): 603-608-5803 (Evening): _____

Facsimile Number: _____ E-Mail Address: BOODIE@SUNNYSIDESOLAR.NH.COM

License number: 10770

Date of approval to install Facility granted by the Company: _____

Eversource Application ID number: #N 5558

Inspection:

The system has been installed and inspected in compliance with the local Building Electrical Code of:

City: Amherst County: Hillsborough

Signed (Local Electrical Wiring Inspector, or attach signed electrical inspection):

Signature: [Signature]

X Name (printed): ROSS P Tenney Date: 5/16/16

Customer Certification:

I hereby certify that, to the best of my knowledge, all information contained in this Exhibit B - Certification of Completion is true and correct. This system has been installed and shall be operated in compliance with applicable standards. Also, the initial start-up test required by Pac. 903.04 has been successfully completed.

Please remember to provide digital photos of the installation, including the AC disconnect switch (if required), the existing Eversource meter, the inverters, and the point of electrical interconnection.

X Customer Signature: James C. [Signature]

As a condition of interconnection you are required to send fax a copy of this form to:

Eversource
Distributed Generation
780 North Commercial Street
P. O. Box 330, Manchester, NH 03105-0330
Fax No.: (603) 634-2924

New Hampshire PUC REC Certification Application Owner Statements

The information provided on this application for New Hampshire Renewable Energy Certificate eligibility is accurate to the best of my knowledge and I authorize Knollwood Energy to act on my behalf in filing said application.

The project described in this application will meet the metering requirements of PUC 2506 including:

Electricity generation in megawatt hours shall be reported to the GIS quarterly with a statement that the submission is accurate by the owner of the source, the independent monitor, or a designated representative.

A revenue quality meter is used to measure the electricity generated.

The facility owner has certified to the independent monitor that the meter operates according to manufacturing standards.

The meter shall be maintained according to the manufacturer's recommendations.

The project is installed and operating in conformance with applicable building codes.

A copy of the facility's interconnection agreement is attached.

James C. Siwik

Printed Name of signature owner

James C. Siwik
James C. Siwik (May 23, 2016)

Signature of system owner

EVERSOURCE - NEW HAMPSHIRE
INTERCONNECTION STANDARDS FOR INVERTERS
SIZED UP TO 100 KVA

Simplified Process Interconnection Application and Service Agreement
[submit form via email to: NHDG@eversource.com]

Eversource Application Project ID#: _____

Contact Information:

Legal Name and Address of Interconnecting Customer (or, Company name, if appropriate)

Customer or Company Name (print): Jim Siwik

Contact Person, if Company: _____

Mailing Address: 28 SEAVEN BRIDGE RD

City: Amherst State: NH Zip Code: 03031

Telephone (Daytime): 603-889-5388 (Evening): _____

Facsimile Number: _____ E-Mail Address: Jim.solar@siwik.org

Alternative Contact Information (e.g., System installation contractor or coordinating company, if appropriate):

Name: Sundial Solar

Mailing Address: 96 Hilliard Rd

City: Chichester, NH State: _____ Zip Code: _____

Telephone (Daytime): _____ (Evening): _____

Facsimile Number: 603-961-0045

www.sundialsolar.com

-just@sundialsolar.com

Electrical Contractor Contact Information (if appropriate):

Name: _____

Mailing Address: Richard Boddie

City: _____ State: 92 Old Town Road Zip Code: _____

Telephone (Daytime): _____ (Evening): _____

Facsimile Number: Boddieconstruction@gmail.com

603-684-5608 License # 10770M

Facility Site Information:

Facility (Site) Address: _____

City: _____ State: NH Zip Code: _____

Electric _____

Service Company: Eversource Account Number: 56083311092 Meter Number: S70938795

Account and Meter Number: Please consult an actual Eversource electric bill and enter the correct Account Number and Meter Number on this application. If the facility is to be installed in a new location, please provide the Eversource Work Request number.

Eversource Work Request # _____

Non-Default' Service Customers Only:

Competitive Electric _____

Energy Supply Company: _____ Account Number: _____

(Customer's with a Competitive Energy Supply Company should verify the Terms & Conditions of their contract with their Energy Supply Company.)

EVERSOURCE – NEW HAMPSHIRE
INTERCONNECTION STANDARDS FOR INVERTERS
SIZED UP TO 100 KVA

Simplified Process Interconnection Application and Service Agreement

Facility Machine Information:

Generator/ SOLAR WORLD Model Name & SB285 silver
Inverter Manufacturer: ENPHASE Number: M250 Quantity: 28
Nameplate Rating: 250 (kW) _____ (kVA) _____ (AC Volts) Phase: Single Three

Nameplate Rating: The Max AC Nameplate rating of the individual inverter.

System Design Capacity: 7.000 (kW) _____ (kVA) Battery Backup: Yes No

System Design Capacity: The system total of the inverter AC ratings. If there are multiple inverters installed in the system, this is the sum of the AC nameplate ratings of all inverters.

Net Metering: If Renewably Fueled, will the account be Net Metered? Yes No

Prime Mover: Photovoltaic Reciprocating Engine Fuel Cell Turbine Other _____

Energy Source: Solar Wind Hydro Diesel Natural Gas Fuel Oil Other _____

Inverter-based Generating Facilities:

UL 1741 / IEEE 1547.1 Compliant (Refer To Part Puc 906 Compliance Path For Inverter Units, Part Puc 906.01 Inverter Requirements)
Yes No

The standard UL 1741.1 dated May, 2007 or later, "Inverters, Converters, and Controllers for Use With Independent Power Systems," addresses the electrical interconnection design of various forms of generating equipment. Many manufacturers choose to submit their equipment to a Nationally Recognized Testing Laboratory (NRTL) that verifies compliance with UL 1741.1. This term "Listed" is then marked on the equipment and supporting documentation. *Please include, any documentation provided by the inverter manufacturer describing the inverter's UL 1741/IEEE 1547.1 listing.*

External Manual Disconnect Switch:

An External Manual Disconnect Switch shall be installed in accordance with 'Part Puc 905 Technical Requirements For Interconnections For Facilities, Puc 905.01 Requirements For Disconnect Switches and 905.02 Disconnect Switch.'

Yes No

Location of External Manual Disconnect Switch: Next to ever source meter

Project Estimated Install Date: Early may Project Estimated In-Service Date: late may

Interconnecting Customer Signature:

I hereby certify that, to the best of my knowledge, all of the information provided in this application is true and I agree to the Terms and Conditions for Simplified Process Interconnections attached hereto:

Customer Signature: [Signature] Title: owner Date: 4/8/16

Please include a one-line and/or three-line diagram of proposed installation. Diagram must indicate the generator connection point in relation to the customer service panel and the Eversource meter socket. Applications without such a diagram may be returned.

For Eversource Use Only

Approval to Install Facility:

Installation of the Facility is approved contingent upon the Terms and Conditions For Simplified Process Interconnections of this Agreement, and agreement to any system modifications, if required.

Are system modifications required? Yes No To be Determined

Company Signature: _____ Title: _____ Date: _____