



REC 15-095

Knollwood Energy of MA LLC  
P.O. Box 30  
Chester, New Jersey 07930

NHPUC 23MAR'15PM1:49

March 18, 2015

Debra A. Howland  
Executive Director  
New Hampshire Public Utilities Commission  
21 South Fruit Street, Suite 10  
Concord, NH 03301-2429

Dear Ms Howland,

Enclosed please find the application for the Michael Conley system to be part of the Knollwood Energy of MA LLC (NH-II-13-089) Class II Photovoltaic aggregation for New Hampshire Renewable Energy Certificates (RECs) generated from customer-sited sources, pursuant to New Hampshire Code of Administrative Rules Puc 2506.

Customer and Facility Information

Michael Conley  
102 Elm St  
Milford, NH 03055  
603.249.9560  
michael@michaelconley.net

The Nepool GIS ID # for this facility is: NON46552. Also enclosed are the Simplified Process Interconnection Application and Service Agreement and the Certificate of Completion for Simplified Process Interconnections. An electronic version has been sent to [executive.director@puc.nh.gov](mailto:executive.director@puc.nh.gov).

Please do not hesitate to contact me if you have any questions regarding this application.

Thank you for your consideration,

Linda Modica  
New England REC Operations Manager  
**Knollwood Energy of MA LLC**  
973.879.7826  
[linda@knollwoodenergy.com](mailto:linda@knollwoodenergy.com)

Enclosures (3)

LINKED



# State of New Hampshire Public Utilities Commission

21 S. Fruit Street, Suite 10, Concord, NH 03301-2429



## DRAFT APPLICATION FORM FOR RENEWABLE ENERGY CERTIFICATE (REC) ELIGIBILITY FOR CLASS I AND CLASS II SOURCES WITH A CAPACITY OF 100 KILOWATTS OR LESS

Pursuant to New Hampshire Administrative Code [Puc 2500](#) Rules including Puc 2505.08, Certification of Certain Customer-Sited Sources

- Please submit one (1) original and two (2) paper copies of the completed application and cover letter\* to:  
**Debra A. Howland, Executive Director, New Hampshire Public Utilities Commission**  
**21 South Fruit Street, Suite 10, Concord, NH 03301-2429**
- Send an electronic version of the completed application and the cover letter electronically to [executive.director@puc.nh.gov](mailto:executive.director@puc.nh.gov).
- The cover letter must include complete contact information and identify the renewable energy class for which the applicant seeks eligibility. Pursuant to Puc 2505.01, the Commission is required to render a decision on an application within 45 days of receiving a completed application.

If you have any questions please contact Barbara Bernstein at (603) 271-6011 or [Barbara.Bernstein@puc.nh.gov](mailto:Barbara.Bernstein@puc.nh.gov).

- Photovoltaic (PV) solar facilities are Class II resources. Contact [Barbara.Bernstein@puc.nh.gov](mailto:Barbara.Bernstein@puc.nh.gov) for assistance.

Eligibility Requested for: Class I  Class II  Check here  if this facility part of an aggregation.

If the facility is part of an aggregation, please list the aggregator's name. Knollwood Energy of MA

- Provide the following information for the owner of the PV system.

Applicant Name Michael Conley Email [Michael@michaelconley.net](mailto:Michael@michaelconley.net)  
 Address 102 Elm St City Milford State NH Zip 03032  
 Telephone 603.249.9560 Cell \_\_\_\_\_

- For business applicants, provide the facility name and contact information (if different than applicant contact information).

Facility Name \_\_\_\_\_ Primary Contact \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Telephone \_\_\_\_\_ Cell \_\_\_\_\_  
 Email address: \_\_\_\_\_

- Provide a complete list of the equipment used at the facility, including the revenue grade REC meter, and, if applicable, the inverter. Your facility will not qualify for RECs without a REC meter.

equipment	quantity	Type	equipment	quantity	Type
PV panels	20	Canadian Solar CS6X-305P	other		
Inverter	1	Solaredge SE7600A-US	other		
meter	1	Itron Centron	other		

- A copy of the interconnection agreement and the approval to operate your PV system from your electric utility must be included with your application.
- For PSNH customers, both the *Simplified Process Interconnection Application* and *Exhibit B - Certificate of Completion* are required.

What is the nameplate capacity of your facility (found on your interconnection agreement)? 6.0 AC

What was the initial date of operation (the date your utility approved the facility)? 1/6/15

- Provide the name, license number and contact information of the installer, or indicate that the equipment was installed directly by the customer.

Installer  
 Name BigSky Renewable Energy LLC Contact Brian Roy License # (if applicable) \_\_\_\_\_  
 Address 4 Bicentennial Sq City Concord State: NH Zip 03301  
 Telephone 603.783.5698 email info@bigskyre.com

If the equipment was installed directly by the customer, please check here:

- Provide the name and contact information of the equipment vendor.

X Check here if the installer provided the equipment and proceed to the next question.

Business Name \_\_\_\_\_ Contact \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Telephone \_\_\_\_\_ email \_\_\_\_\_

- If an independent electrician was used, please provide the following information.

Electrician's Name Jordan Hill License # 1342M  
 Business Name Hill Electric Email [hillelectric@comcast.net](mailto:hillelectric@comcast.net)

Address PO BOX 545 City Londonderry State NH Zip 03053

- **Provide the name of the independent monitor for this facility.** (A [list](http://www.puc.nh.gov/Sustainable%20Energy/Renewable_Energy_Source_Eligibility.htm) of approved independent monitors is available at [http://www.puc.nh.gov/Sustainable%20Energy/Renewable\\_Energy\\_Source\\_Eligibility.htm](http://www.puc.nh.gov/Sustainable%20Energy/Renewable_Energy_Source_Eligibility.htm).)

Independent Monitor's Name Paul Button Energy Audits Unlimited

Is the facility certified under another state's renewable portfolio standard?    yes     no   
If "yes", then provide proof of the certification as **Attachment C**.

- *Please note, if your facility is part of an aggregation, your aggregator should provide you with the following information.*
- **In order to qualify your facility's electrical production for Renewable Energy Certificates (RECs), you must register with the NEPOOL – GIS. Contact information for the GIS administrator follows:**

James Webb  
Registry Administrator, APX Environmental Markets  
224 Airport Parkway, Suite 600, San Jose, CA 95110  
Office: 408.517.2174    [jwebb@apx.com](mailto:jwebb@apx.com)

If you are not part of an aggregation, Mr. Webb will assist you in obtaining a GIS facility code.

GIS Facility Code # NON46552                      Asset ID # NON46552

- **Complete an affidavit by the applicant or qualified installer that the project is installed and operating in conformance with any applicable state/local building codes.** Use either the following affidavit form or provide a separate document.
- **The Commission requires a notarized affidavit as part of the application.**

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#### AFFIDAVIT

The Undersigned applicant declares under penalty of perjury that the project is installed and operating in conformance with all applicable building codes. (please see attached)

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Applicant's Printed Name Linda Modica

Subscribed and sworn before me this \_\_\_\_\_ Day of \_\_\_\_\_ (month) in the year \_\_\_\_\_

County of \_\_\_\_\_ State of \_\_\_\_\_

\_\_\_\_\_  
Notary Public/Justice of the Peace

My Commission Expires \_\_\_\_\_

- Complete the following checklist. If you have questions, contact [barbara.bernstein@puc.nh.gov](mailto:barbara.bernstein@puc.nh.gov).

CHECK LIST: The following has been included to complete the application:	YES
• All contact information has been provided.	X
• A copy of the interconnection agreement. PSNH Customers should include both <i>the Interconnection Standards for Inverters Sized up to 100 KVA</i> <b>and</b> <i>Exhibit B – Certification of Completion for Simplified Process Interconnection</i> .	X
• Documentation of the distribution utility’s approval of the installation.*	X
• If the facility is participating in another state’s renewable portfolio standard (RPS) program, documentation of certification in other state’s RPS.	
• A signed and notarized attestation.	X
• A GIS number obtained from the GIS Administrator.	X
• The document has been printed and notarized.	X
• The original and 2 copies are included in the packet mailed to Debra Howland, Executive Director of the PUC.	X
• An electronic version of the completed application has been sent to <a href="mailto:executive.director@puc.nh.gov">executive.director@puc.nh.gov</a> .	X
<i>*Usually included in the interconnection agreement.</i>	

- If the application has been prepared by someone other than the applicant, complete the following. If the application was prepared by the applicant, check here  and skip this section.

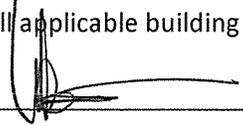
**PREPARER'S INFORMATION**

Preparer's Name Linda Modica Email address: [linda@knollwoodenergy.com](mailto:linda@knollwoodenergy.com)  
 Address PO Box 30 City Chester State NJ Zip 07930  
 Telephone 973.879.7826 Cell \_\_\_\_\_  
 Preparer's Signature: \_\_\_\_\_

- Complete an affidavit by the applicant or qualified installer that the project is installed and operating in conformance with any applicable state/local building codes. Use either the following affidavit form or provide a separate document.
- The Commission requires a notarized affidavit as part of the application.

**AFFIDAVIT**

The Undersigned applicant declares under penalty of perjury that the project is installed and operating in conformance with all applicable building codes.

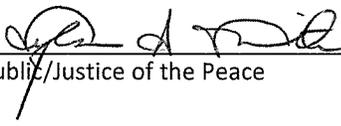
Applicant's Signature  Date 3/19/15

Applicant's Printed Name Linda Modica

Subscribed and sworn before me this 19 Day of March (month) in the year 2015

County of Morris State of New Jersey

**SYLVIA A. SMITH**  
 Notary Public  
 State of New Jersey  
 My Commission Expires Jan. 6, 2019  
 I.D.# 2309220

  
 Notary Public/Justice of the Peace

My Commission Expires \_\_\_\_\_

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PUBLIC SERVICE COMPANY OF NEW HAMPSHIRE  
INTERCONNECTION STANDARDS FOR INVERTERS  
SIZED UP TO 100 KVA

Simplified Process Interconnection Application and Service Agreement

PSNH Application Project ID#: N3249

**Contact Information:**

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

Customer or Company Name (print): Michael Conley

Contact Person, if Company: \_\_\_\_\_

Mailing Address: 102 Elm St

City: Milford State: NH Zip Code: 03055

Telephone (Daytime): 603.249.9560 (Evening): \_\_\_\_\_

Facsimile Number: \_\_\_\_\_ E-Mail Address: michael@michaelconley.net

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

Name: BigSky Renewable Energy LLC

Mailing Address: 4 Bicentennial Sq Suite 3A Unit 2

City: Concord State: NH Zip Code: 03301

Telephone (Daytime): 603.491.2702 (Evening): \_\_\_\_\_

Facsimile Number: \_\_\_\_\_ E-Mail Address: brian@bigskyre.com

**Electrical Contractor Contact Information** (if appropriate):

Name: Harry O Electrical Corp Jordan Hill

Mailing Address: 75 NH Highway 125 PO Box 545

City: Loudon Londonderry State: NH Zip Code: 03307 03053

Telephone (Daytime): 603.798.5599 (Evening): \_\_\_\_\_

Facsimile Number: \_\_\_\_\_ E-Mail Address: gary@harryoelectric.com hillelectric@comcast.net

**Facility Site Information:**

Facility (Site) Address: 102 Elm St

City: Milford State: NH Zip Code: 03055

Electric \_\_\_\_\_

Service Company: PSNH Account Number: 56932790074 Meter Number: G57544053 ✓

Account and Meter Number: Please consult an actual PSNH 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 PSNH Work Request number.

PSNH 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.)

PUBLIC SERVICE COMPANY OF NEW HAMPSHIRE  
INTERCONNECTION STANDARDS FOR INVERTERS  
SIZED UP TO 100 KVA

Simplified Process Interconnection Application and Service Agreement

**Facility Machine Information:**

Generator: \_\_\_\_\_ Model Name & Number: SE6000A-US ✓ Quantity: 1 ✓  
Inverter Manufacturer: Solaredge ✓  
✓ Nameplate Rating: 6000 (kW) (kVA) (AC Volts) Phase: Single  Three   
*6kW AC* Nameplate Rating: The AC Nameplate rating of the individual inverter.  
System Design Capacity: 5220 (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 Interconnect Switches, Puc 905.01 Requirements For Disconnect Switches and 905.02 Disconnect Switch?  
✓ Yes  No   
Location of External Manual Disconnect Switch: On the tracker and at the point of entry to the house. Southern side of house.

Project Estimated Install Date: 11-17-14 Project Estimated In-Service Date: 11-21-14

**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: *Michael Cortez* Title: *Owner* Date: 11-18-14

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 PSNH meter socket. Applications without such a diagram may be returned.

**For PSNH 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: *Michael Moffa* Title: *SR. ENG. NEE* Date: 11-21-14

PUBLIC SERVICE COMPANY OF NEW HAMPSHIRE  
INTERCONNECTION STANDARDS FOR INVERTERS  
SIZED UP TO 100 KVA (Continued)

**Exhibit B - Certificate of Completion for Simplified Process Interconnections**

Installation Information:

Check if owner-installed

Customer or Company Name (print): Michael Conley

Contact Person, if Company: \_\_\_\_\_

Mailing Address: 102 Elm St

City: Milford State: NH Zip Code: 03032

Telephone (Daytime): 603.249.9560 (Evening): \_\_\_\_\_

Facsimile Number: \_\_\_\_\_ E-Mail Address: michael@michaelconley.net

Address of Facility (if different from above): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Generation Vendor: \_\_\_\_\_ Contact Person: \_\_\_\_\_

I hereby certify that the system hardware is in compliance with Puc 900.

Vendor Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Electrical Contractor's Name (if appropriate): Jordan Hill

Mailing Address: PO Box 545

City: Londonderry State: NH Zip Code: 03053

Telephone (Daytime): 603.765.7643 (Evening): \_\_\_\_\_

Facsimile Number: \_\_\_\_\_ E-Mail Address: hillelectric@comcast.net

License number: 13342M

Date of approval to install Facility granted by the Company: 11/21/14 Installation Date: \_\_\_\_\_

Application ID number: N3249

Inspection:

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

Milford/Hillsborough

(City/County)

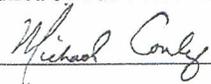
Signed (Local Electrical Wiring Inspector, or attach signed electrical inspection): 

Name (printed): Tim Heffley

Date: 1-6-15

Customer Certification:

I hereby certify that, to the best of my knowledge, all the information contained in this Interconnection Notice is true and correct. This system has been installed and shall be operated in compliance with applicable electrical standards. Also, the initial start up test required by Puc 905.04 has been successfully completed.

Customer Signature:  Date: 1-6-15