

Who is submitting this request?

Aggregator

Aggregator Batch Number

KN0315

Aggregator name

Knollwood Energy

Aggregator Email

linda@knollwoodenergy.com

Other Aggregator name

Other aggregator email address

Facility Owner Name

Steven Tieland

Owner Prefix

Mr.

Facility Owner email

Steve@Tieland.us

Owner Phone

603-537-0063

Facility Address

150 Kendall Pond Rd

Facility Town/City

Windham

Facility State

NH

Facility Zip

03087

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 (who should we call with questions)

Contact Phone

Other Email Address

Facility Information

Class

Utility

Other Utility Name

Date of Utility Signoff

To obtain a GIS ID contact:

James Webb

408 517 2174

jwebb@apx.com

GIS ID (include "NON")

59090

Facility Operator Name, if applicable

Panel Quantity

25

Panel Make

SunEdison

Panel Model

F270

Panel Rated Output

270

System capacity based on panels

6.7500

Inverter Quantity

25

Inverter Make

Enphase Energy

Additional Inverter

Rated Output

215

System capacity based on inverters

5.38

System capacity in mW as stated on the interconnection agreement

5.375

Revenue Grade Meter Make

AEE Solar

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

- Yes
- No

Date of Electrician Signoff

Sign-off Electrician's License Number

Installation Company

Other Installation Company Name

Other Inst. Company Address

Other Inst. Company City

Other Inst. Company State

Other Inst. Company Zip

Independent Monitor Name

Monitor Company Name

Monitor Company Name

Monitor Company Name

Monitor Company Name

Other Monitor Company Name

Is the installer also the equipment vendor?

- Yes
 No

Equipment Vendor

SunEdison

Please attach your completed interconnection agreement including Exhibit B.

https://fs30.formsite.com/jan1947/files/f-5-99-5797874_0GMpZWTD_Tieland_PV_-_Processed_Applic

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.

Please attach additional document here

https://fs30.formsite.com/jan1947/files/f-5-168-5797874_ovsKfGok_Tieland_NHOS.pdf

Please attach additional document here

https://fs30.formsite.com/jan1947/files/f-5-173-5797874_wHyp0jA1_Tieland_COC.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

Linda Modica

Date Signed

01/02/2016

RECEIVED #2

MAY 13 2015

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

SESD

Simplified Process Interconnection Application and Service Agreement

PSNH Application Project ID#: N 3152

Contact Information:

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

Customer or Company Name (print): Steven Tieland

Contact Person, if Company: _____

Mailing Address: 150 Kendall Pond Rd

City: Windham State: New Hampshire Zip Code: 03087

Telephone (Daytime): (603) 537-0063 (Evening): _____

Facsimile Number: _____ E-Mail Address: steve@tieland.us

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

Name: SunRay Solar, LLC

Mailing Address: 249 Loudon Rd

City: Concord State: New Hampshire Zip Code: 03301

Telephone (Daytime): (603) 225-6001 (Evening): _____

Facsimile Number: _____ E-Mail Address: justin@spreadthesunshine.com
rick@spreadthesunshine.com

Electrical Contractor Contact Information (if appropriate):

Name: Shawn Marvel

Mailing Address: 249 Loudon Rd

City: Concord State: New Hampshire Zip Code: 03301

Telephone (Daytime): (603) 209-4364 (Evening): _____

Facsimile Number: _____ E-Mail Address: shawn@spreadthesunshine.com
brian@spreadthesunshine.com

Facility Site Information:

Facility (Site) Address: 150 Kendall Pond Rd ✓

City: Windham State: NH Zip Code: 03087

Electric _____

Service Company: PSNH Account Number: 56137541017 ✓ Meter Number: G15936082 (OLD) ✓ S71151330 as of 3/31/15

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

#2

Simplified Process Interconnection Application and Service Agreement

Facility Machine Information:

5.375 kW
MAX AC

Generator/ Inverter Manufacturer: Enphase ✓ Model Name & Number: M250 M215 ✓ Quantity: 45 = 25 ✓
Nameplate Rating: 250, 215 (kW) (kVA) (AC Volts) Phase: Single Three
Nameplate Rating: *The AC Nameplate rating of the individual inverter.*
System Design Capacity: 275 5.38 (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 the meter. ✓

Project Estimated Install Date: May

Project Estimated In-Service Date: 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: Homeowner Date: 9/17/14

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: [Signature] Title: SR. ENGINEER Date: 5-14-15

Public Service Company Of New Hampshire
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): Steven Tieland

Contact Person, if Company: _____

Mailing Address: 150 Kendall Pond Rd

City: Windham State: New Hampshire Zip Code: 03087

Telephone (Daytime): (603) 537-0063 (Evening): _____

Facsimile Number: _____ E-Mail Address: steve@tieland.us

Facility Information:

Address of Facility (if different from above): _____

City: _____ State: _____ Zip Code: _____

Electrical Contractor Contact Information:

Electrical Contractor's Name (if appropriate): Shawn Marvel

Mailing Address: 249 Loudon Rd

City: Concord State: New Hampshire Zip Code: 03301

Telephone (Daytime): (603) 209-4364 (Evening): _____

Facsimile Number: _____ E-Mail Address: shawn@spreadthesunshine.com
brian

License number: ~~43363-M~~ 12245M

Date of approval to install Facility granted by the Company: 5-15-15

PSNH Application ID number: #N 3152

Inspection:

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

City: Windham County: Rockingham

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

Signature: [Signature]

Name (printed): Mike McGuire Date: 6/15/15

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: 905.04 has been successfully completed.

Customer Signature: [Signature]

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

Public Service Company of New Hampshire
Supplemental Energy Sources Department
780 North Commercial Street
P. O. Box 330, Manchester, NH 03105-0330
Fax No.: (603) 634-2449

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:

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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.

Steve Tieland

Printed Name of signature owner

Steve Tieland
Steve Tieland (Nov 12, 2015)

Signature of system owner