

REC 16-183

KNOLLWOOD ENERGY

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

NHPUC 22JAN15PM12:06

January 15, 2016

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 applications for 12 systems 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.

Also enclosed are the Simplified Process Interconnection Application and Service Agreement, and the Certificate of Completion.

Electronic versions have been entered into the new online application system under batch number KN16008.

Michael Melasecca	Sheila Piwowarczyk
Ed Mical	Brad Presby
David Munro	Doug Silver
Christopher Murphy	John Stone
David Phillips	Robert Twombly
Stephen Phillips	Shaine Young

Please feel free to contact me with any questions or further instructions.
Thank you for your consideration,

Linda Modica
New England REC Operations Manager
Knollwood Energy of MA LLC
973.879.7826
linda@knollwoodenergy.com

NH Public Utilities Commission

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 Batch Number

Aggregator name

Aggregator Email

Other Aggregator name

Other aggregator email address

Facility Owner Name

Facility Owner email

Owner Phone

Facility Address

Facility Town/City

S. Hampton

Facility State

NH

Facility Zip

03827

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)

Linda Modica

Contact Phone

Other Email Address

Facility Information

Class

II

Utility

Unitil

Other Utility Name

To obtain a GIS ID contact:

James Webb

408 517 2174

jwebb@apx.com

GIS ID (include "NON")

NON58407

Date of Initial Operation

10/23/2015

Facility Operator Name, if applicable

Panel Quantity

48

Panel Make

LG

Panel Model

300N1C

Panel Rated Output

300

System capacity based on panels

0.1440

Inverter Quantity

48

Inverter Make

Enphase Energy

Add'l Inverter Quantity

NA

Additional Inverter Make

None

Add'l Inverter Model

Rated Output - Primary Inverter

Rated Output - Additional Inverter

System capacity based on single inverter make

System capacity based on two inverter types

System capacity in mW as stated on the interconnection agreement

Revenue Grade Meter Make

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

- Yes
- No

Electrician Name & Number

Other Electrician Name & 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 & 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 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-5-168-5894925_b9M9h1qM_Silver_Signed_COC.pdf

Please attach additional document here

https://fs30.formsite.com/jan1947/files/f-5-173-5894925_jyNDphA3_Silver_NHOS.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.

A handwritten signature in black ink, consisting of a stylized 'L' followed by a horizontal line that tapers to the right.

Print Name

Linda Modica

Date Signed

01/15/2016

UNITIL ENERGY SYSTEMS, INC. hereinafter as "UNITIL"
NH INTERCONNECTION STANDARDS FOR INVERTERS
SIZED UP TO 100 KVA (Continued)

Simplified Process Interconnection Application and Service Agreement

Contact Information: Date Prepared: _____
Legal Name and address of Interconnecting Customer (or, Company name, if appropriate)
Customer or Company Name (print): Douglas Silver Contact Person, if Company: _____
Mailing Address: 99 Woodman Rd.
City: South Hampton State: N.H. Zip Code: 03827
Telephone (Daytime): 603-394-7633 (Evening): 603-394-7633 603-205-7711
Facsimile Number: _____ E-Mail Address: hihodpsilver@yahoo.com

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

Name: Boston Solar - Cassandra Acacia
Mailing Address: 55 Sixth Rd.
City: Woburn State: MA Zip Code: 01801
Telephone (Daytime): 617-838-1643 (Evening): _____
Facsimile Number: _____ E-Mail Address: cassandra.acacia@bostonadar.us

Electrical Contractor Contact Information (if appropriate):

Name: _____ Telephone: _____
Mailing Address: _____
City: _____ State: _____ Zip Code: _____

Facility Information:

Address of Facility: 99 Woodman Rd.
City: S. Hampton State: NH Zip Code: 03824
Electric Service Company: _____ Account Number: 2075523-2076809 Meter Number: 118040
Inverter Manufacturer: Enphase Model Name and Number: H-250 Quantity: 48
Nameplate Rating: 250 (kW) _____ (kVA) 240 (AC Volts) Single or Three _____ Phase
System Design Capacity: _____ (kVA) _____ (kVA) 14.4 DC 12 AC
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 _____
UL 1741.1 (IEEE 1547.1) Listed? Yes No _____
Estimated Install Date: _____ Estimated In-Service Date: _____

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 on the following page:

Interconnecting Customer Signature: Douglas Silver Title: owner Date: 6-23-2015

Please attach any documentation provided by the inverter manufacturer describing the inverter's UL 1741 listing.

Approval to Install Facility (For Company use only)

Installation of the Facility is approved contingent upon the terms and conditions of this Agreement and agreement to any system modifications, if required (Are system modifications required? Yes _____ No To be determined _____):

Company Signature: [Signature] Title: MOB Dist. Date: Aug 14, 2015

Company waives inspection/Witness Test? Yes _____ No _____

Exhibit B - Certificate of Completion for Simplified Process Interconnections

Installation Information:

Check if owner-installed

Customer or Company Name (print): Doug Silver Contact Person, if Company: _____
Mailing Address: 99 Woodman Road
City: South Hampton State: NH Zip Code: 03827
Telephone (Daytime): _____ (Evening): _____
Facsimile Number: _____ E-Mail Address: _____

Address of Facility (if different from above): _____
City: _____ State: _____ Zip Code: _____

Electrical Contractor's Name (if appropriate): William T. Foglietta
Mailing Address: 55 Sixth Road
City: Woburn State: MA Zip Code: 01801
Telephone (Daytime): 781-462-8702 (Evening): _____
Facsimile Number: 781-780-7813 E-Mail Address: inspections@bostonsolar.us
License number: 13565M

Date of approval to install Facility granted by the Company: 8/17/2015

Application ID number: 1143

Inspection:

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

South Hampton
(City/County)

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

[Signature]
Name (printed): Michael Keith

Date: 10/23/15

As a condition of interconnection you are required to send/fax a copy of this form to (insert Company's name below):

Name: _____
Company: _____
Mail 1: _____
Mail 2: _____
City, State ZIP: _____
Fax No.: _____

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.

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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.

Douglas P. Silver

Printed Name of signature owner

Douglas P Silver

Douglas P Silver (Nov 12, 2015)

Signature of system owner