

NH Public Utilities Commission

NHPUC 27APR'16AM11:42

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

Are you registered in NH

- Yes
 No

Aggregator name

NH Reg #

Aggregator Email

Other Aggregator name

Other aggregator email address

Facility Name

Facility Owner Name

Facility Owner email

davidss@tds.net

Owner Phone

603-648-2109

Facility Address

877 Battle Street

Facility Town/City

Webster

Facility State

NH

Facility Zip

03303

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 Quantity

Inverter Make

Add'l Inverter Quantity

Additional Inverter Make

Rated Output - Primary Inverter

400

Rated Output - Additional Inverter

System capacity based on single inverter make

400

System capacity based on two inverter types

System capacity in kW as stated on the interconnection agreement

12.0

Revenue Grade Meter Make

Itron

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

- Yes
 No

Electrician Name & Number

Kim Frase4146M

Other Electrician Name & Number

Installation Company

Frase Electric, LLC

Other Installation Company Name

Other Inst. Company Address

Other Inst. Company City

Other Inst. Company State

Other Inst. Company Zip

Independent Monitor Name & Company

Paul Button - Energy Audits Unlimited

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.

https://fs30.formsite.com/jan1947/files/f-5-99-6624999_R6zsv2Y0_StewartSmith_COC.pdf

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

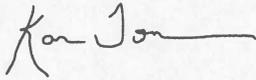
https://fs30.formsite.com/jan1947/files/f-5-168-6624999_IQp12N3a_Stewart_Smith_NHOS.pdf

Please attach additional document here

https://fs30.formsite.com/jan1947/files/f-5-173-6624999_fH5roYmg_StewartSmith_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.

A handwritten signature in black ink, appearing to read "Karen Tonnesen", is written inside a rectangular box.

Print Name

Karen Tonnesen

Date Signed

04/24/2016

NA -
emailed to
David at 10/5/15

Exhibit B - Certificate of Completion for Simplified Process Interconnections

Installation Information:

Check if owner-installed

Customer or Company Name (print): David Stewart-Smith Contact Person, if Company: _____
Mailing Address: 877 Battle St.
City: Webster State: NH Zip Code: 03303
Telephone (Daytime): 603-648-2109 (Evening): _____
Facsimile Number: _____ E-Mail Address: davidss@tds.net

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

Electrical Contractor's Name (if appropriate): Frase Electric LLC
Mailing Address: 789 Whittier Hwy
City: So. Tamworth State: NH Zip Code: 03883
Telephone (Daytime): 603-284-6618 (Evening): 284-6618
Facsimile Number: 284-6343 E-Mail Address: Kim@fraseelectric.com
License number: 4146M

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

Application ID number: 1217

Inspection:

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

Webster / Merrimack
(City/County)

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

[Signature]

Name (printed): KIM FRASE

Date: 10/5/15

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.: _____

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

8/17/15
Scanned & emailed
to Valerie Weiland
at UNITIL

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): David Stewart-Smith Contact Person, if Company: _____
Mailing Address: 877 Battle St.
City: Webster State: NH Zip Code: 03303
Telephone (Daytime): 603-648-2109 (Evening): _____
Facsimile Number: _____ E-Mail Address: davidss@tels.net

Alternative Contact Information (e.g., system installation contractor or coordinating company, if appropriate):
Name: Frase Electric LLC
Mailing Address: 789 Webster Hwy
City: So. Tamworth State: NH Zip Code: 03883
Telephone (Daytime): 603-284-6618 (Evening): 284-6618
Facsimile Number: 284-6343 E-Mail Address: king@fraseelectric.com

Electrical Contractor Contact Information (if appropriate):
Name: SARIE ASHBORE Telephone: _____
Mailing Address: _____
City: _____ State: _____ Zip Code: _____

Facility Information:
Address of Facility: 877 Battle St.
City: Webster State: NH Zip Code: 03303
Electric Service Company: Unitil Account Number: 1009151-10078 Meter Number: _____
Inverter Manufacturer: Solar Edge Model Name and Number: SE1140A-6 Quantity: 1
Nameplate Rating: 12 (KW) 12 (KVA) 240 (AC Volts) Single or Three _____ Phase
System Design Capacity: _____ (kVA) _____ (kVA)
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: 9/15/15 Estimated In-Service Date: 9/30/15

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: _____ Title: owner Date: 8/17/15
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: _____ Title: _____ Date: _____
Company waives inspection/Witness Test? Yes _____ No _____



File

November 9, 2015

David Stewart-Smith
877 Battle Street
Webster, NH 03303

Dear David:

This letter is to notify you that a net meter has been installed at: 877 Battle Street
Webster, NH

We have replaced your standard meter with a "Net Meter" and you are now authorized
to energize your generator and interconnect to the Unitil electric system.

Please, do not hesitate to contact me if you have any further questions or comments.

Warmest regards,

Valerie Weinand

Valerie Weinand
Program Specialist
Customer Energy Solutions



325 West Road
Portsmouth, NH 03801

T 603.294.5137 F 603.294.5237 E weinand@unitil.com

www.unitil.com

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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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.

David Stewart-Smith

Printed Name of signature owner

David Stewart-Smith
David Stewart-Smith (Apr 21, 2016)

Signature of system owner