REC 16-656

NHPUC 16JUN'16AM11:15

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

Aggregator Batch Number

KE061416

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

Michael Nachajski

Facility Owner email

mjnachajski@gmail.com

Owner Phone

603-313-1969

Facility Address

28 Holden Hill Road

Facility Town/City

Langdon

Facility State

NH

Facility Zip

03602

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

II

Utility

Liberty

Other Utility Name

To obtain a GIS ID contact:

James Webb

408 517 2174

jwebb@apx.com

GIS ID (include "NON")

NON78440

Date of Initial Operation

06/01/2016

Facility Operator Name, if applicable

Panel Make #1

LG

Panel Model

Other

Panel Quantity

27

Panel Rated Output

315

Other panel make

Other panel model

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

8505

Inverter Make

Solar Edge

Other inverter make

Inverter Quantity

1

Add'l Inverter Quantity

NA

Additional Inverter Make

None

Rated Output - Primary Inverter

7600

Rated Output - Additional Inverter

System capacity based on single inverter make

7600

System capacity based on two inverter types

System capacity in kW as stated on the interconnection agreement

8.35

Revenue Grade Meter Make

Revenue Grade GIS Approved Meter

GE

Other revenue-grade GIS-approved meter

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

- ○ Yes
- ◉ No

Electrician Name & Number

E.E. Houghton 0241C

Other Electrician Name & Number

Installation Company

Solar Dave LLC

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

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-5-99-6997691_UL2YFTpF_Nachajski_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 (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-5-168-6997691_zefDCALF_Michael_Nachajski_contract_part_

Please attach additional document here

https://fs30.formsite.com/jan1947/files/f-5-173-6997691_arh23hCd_Nachajski_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.

Karen Tonnesen

Print Name

Karen Tonnesen

Date Signed

06/14/2016

Exhibit B - Certificate of Completion for Simplified Process Interconnections

Installation Information: Check if owner-installed

Customer or Company Name (print): Michael Nachajski		Contact Person, if Company:	
Mailing Address: 28 Holden Hill Rd			
City: Langdon	State: NH	Zip Code: 03602	E-Mail Address mjnachajski@gmail.com
Telephone (Daytime): 603 313 1969	(Evening): 603 313 1969	Facsimile Number:	
Address of Facility (if different from above):			
City:	State:	Zip Code:	
Generation Vendor: Solar Dave LLC	Contact Person: David Wirth		

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

Vendor Signature: David Wirth Date: 5/28/2016

Electrical Contractor's Name (if appropriate): E.E. Houghton Co Inc		License number: 02411C	
Mailing Address: PO Box 367			
City: Walpole	State: NH	Zip Code: 03608	E-Mail Address info@eehoughton.com
Telephone (Daytime): 603 756 3372	(Evening): 603 756 3372	Facsimile Number: 603 756 5558	

Date of approval to install Facility granted by the Company: _____ Installation Date: 5/28/2016
Application ID number: _____

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

Langdon, Sullivan
(City/County)

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

Name (printed): Steve Grenier Date: 5/28/16

Dated: July 03, 2012
Effective: July 03, 2012

Issued by: /s/ Victor D. Del Vecchio
Victor D. Del Vecchio
Title: President

Authorized by Docket No. DG 11-040, NHPUC Order No 25,370, Dated 05/30/2012

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, tl initial startup test required by Puc 905.04 has been successfully completed.

Customer Signature: _____ Date: 6/1/16

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

Electric Sales and Marketing
Liberty Utilities
9 Lowell Road
Salem, NH 03079
NHSalesMarketing@LibertyUtilities.com

Issued by: /s/ Victor D. Del Vecchio
Victor D. Del Vecchio
Title: President

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.

Michael Nachajski

Printed Name of signature owner

Michael Nachajski

Michael Nachajski (Jun 3, 2016)

Signature of system owner

waitlist#10

Simplified Process Interconnection Application and Service Agreement

Contact Information: Date Prepared: 3/2/16

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

Customer or Company Name (print): Michael Nachajski *Contact Person, if Company:* _____

Mailing Address: 28 Holden Hill Rd

City: Langdon *State:* NH *Zip Code:* 03602 *E-Mail:* mjnachajski@gmail.com

Telephone (Daytime): (603)313-1969 *(Evening):* (603)313-1969 *Facsimile Number:* (802)885-2685

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

Name: David Wirthy Solar Dave LLC

Mailing Address: 411 Spofford Rd

City: Westmoreland *State:* NH *Zip Code:* 03467 *E-Mail:* solardave4@gmail

Telephone (Daytime): 603-313-8671 *(Evening):* 313-8671 *Facsimile Number:* _____

Electrical Contractor Contact Information *(if appropriate)*:

Name: E.E. Houghton *Telephone:* (603)756-3372

Mailing Address: P.O. BOX 387

City: Walpole *State:* NH *Zip Code:* 03608

Facility Information:

E-15452589

Address of Facility: 28 Holden Hill Rd

City: Langdon *State:* NH *Zip Code:* 03602

Electric Supply Co: Liberty Utilities *Acct #:* 4465637144373608 *Meter #:* ~~ACG015452589~~81A41

Gen/Inverter Manu: Solar Edge *Model Name and #:* SE 7600A-US *Quantity:* 1

Nameplate Rating: 7.65 (kW) 8.35 (kVA) 240 (AC Volts) *Single* ✓ or *Three* _____ *Phase*

System Design Capacity: 8.35 (kW) 8.35 *(kVA)* *Battery Backup: Yes:* _____ *No:* ✓

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

Prime Mover: Photovoltaic ☑ Recip'g Engine ☐ Fuel Cell ☐ Turbine ☐ Other: _____

Energy Source: Solar ☑ Wind ☐ Hydro ☐ Diesel ☐ Nat Gas ☐ Fuel Oil ☐ Other: _____

UL 1741.1 (IEEE 1547.1) Listed? Yes: ✓ No: _____ *External Manual Disconnect:* Yes: ✓ No: _____

Estimated Install Date: 5/15/2016 *Estimated In-Service Date:* 5/16/2016

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 on the following page:

Customer Signature: Michael Nachajski Title: Owner Date: 3/2/16

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: [X] To be Determined _____

Company Signature: Joel A Rivera Title: Engineering Date: 4/7/16

Company waives inspection/Witness Test? Yes: [X] **No:** _____

Application Number 2016-12

enrollment

Dated: May 4, 2015 Issued by /s/ Richard Leehr