DEB-DA

STATE OF NEW HAMPSHIRE PUBLIC UTILITIES COMMISSION

SAMPLE APPLICATION FORM

FOR CUSTOMER-SITED RENEWABLE ENERGY SOURCE ELIGIBILITY

Pursuant to New Hampshire Admin. Code Puc 2500 Rules

Pursuant to Puc 202, the signed application shall be filed with the Executive Director and Secretary of the New Hampshire Public Utilities Commission (Commission). To ensure that your submitted application is complete, please read RSA 362-F and N.H. Code Admin. Rules Puc 2500 before filling out this application. It is the burden of the applicant to provide timely, accurate and complete information as part of the application process. Any failure by the applicant to provide information in a timely manner may result in the Commission dismissing this application without prejudice.

NOTE: When completing this application electronically, using the "tab" key after completing each answer will move the cursor to the next blank to be filled in. If a question is not applicatiable to your facility, then check the box next to N/A.

1.	ELIGIBILITY	CLASS APPLIED FOR:	I x II		
2.	Applicant's legal name:	Kheops International, Inc			_
3.	Residential or (1)	Commercial			_
	Business Address: (2)	232 U.S. Route #3, Colebrook, NH 03576			
		(City)	(State)	(Zip Code)	
	Site Location if (3) different than above.	N/A			
		(City)	(State)	(Zip Code)	
4.	Telephone number:	603-237-8188, ext. 226			
5.	Facsimile number:	N/A			
6.	Email address:	mary@kheopsinternational.com			
7.	Installing Electrician's Name:	Rodney Smith			
8.	Business Address: (1)	246 US Rt 3			

		(2)			
		(3)			
		,	Stewartstown (City)	NH (State)	(Zip Code)
9.	Telephone number:		603-246-8698		
10.	Facsimile number:				
11. 12.	Email address: Equipment vendor's Name:		Smart Energy of New England, Inc		
13.	Business Address:	(1)	120 Angels Road		
		(2)	PO Box 56		
		(3)		arer miratire state.	
			Colebrook (City)	NH (State)	03576 (Zip Code)
14.	Telephone number:		603-915-1507		
15.	Facsimile number:		N/A		
16. 17.	Email address: Independent Monito	or's	david@smartenergyne.com Thomas Kelly		
18.	Name: Business Address:	(1)	2 Suncook Terrace #36		
		(2)			
		(3)	Merrimack	NH	03054
			(City)	(State)	(Zip Code)
19.	Telephone number	:	603-546-5816		
20.	Facsimile number:				

Email address: tom@naturalcapital-llc.com
The ISO-New England asset identification number, if applicable: 35478 or N/A: x
The GIS facility code, if applicable: NON35478 or N/A: x
If Class I, please identify type of source below: N/A solar hot water heating, wind generation and/or other generation If other type of generation, provide a description. (Attach as "Exhibit A")
A list and description of the equipment used at the facility, including the meter and, if applicable, the inverter (Attach as "Exhibit B") Attached as Exhibit B
A copy of the interconnection agreement pursuant to Puc 307.06, if applicable, between the applicant and the distribution utility. (Attach as "Exhibit C" or N/A
A signed attestation by the owner/applicant that the project is installed and operating in conformance with any applicable building codes. (Attach as "Exhibit D" or N/A x
For an installation with electric output, documentation of the applicable distribution utility's approval of the installation. (Attach as "Exhibit E" or N/A x See also Exhibit C
This application and all future correspondence should be sent to: Ms. Debra A. Howland Executive Director and Secretary State of New Hampshire Public Utilities Commission 21 S. Fruit St, Suite 10 Concord, NH 03301-2429

30.	Preparer's Information:				
	Name:	David Belanger			
	Title:	President			
	Address: (1)	120 Angels Road			
	(2)	PO Box 56			
	(3)				
		Colebrook	NH	03576	
		(City)	(State)	(Zip Code)	
	Preparer's Signature:		Date:	11/20/2012	
I attest that this project has been installed and is operating in conformance with any applicable building an					
	electrical codes:	160.50		11/21/12	
	Owner's Signature:	July -	Date:	11/00/12	
	Notary's Signature:	Luda Silpale	Date:	11/21/12	
		LINDA S. YORKE Notary Public - New Hamp	oshire	, ,	
	My Commission Expires October 20, 2015				

EXHIBIT B

List and description of the equipment used at the facility, including the meter and, if applicable the inverter

Quantity Description

- 40 Sharp 224 Watts solar panels
- 1 IG 10.0-1 Fronius Inverter
- 1 Focus KWH meter # 112 643 233

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

Simplified Process Interconnection Application and Service Agreement

INTERCONNECTION		NEW HAMPSHIRE S FOR INVERTERS Continued)	ment of s
Simplified Process Intercon	-		nent (D, ")
Contect Information:		pered: 8-24-2011	Tig.
Context micromature Legal Name and Address of Interconnecting Custom	•		_ 0
Customer or Company Name (print): Kheops In	iternational Inc	itic'i i chhichicael	
Contact Person, if Company: Mary Guevman	rd		
Mailing Address 232 US Rout #3			
City: Colebrook	Sale NH	Zip Code:	03576
Telephone (Neutime): 603-238-8188 ext 220	6 (Evening):		
Facsimile Number:	E-Mail Address	marv@kheopsinterna	ational.com
Alternative Contact Information (e.g., system installa			
Name: Smart Energy of New England L		man memmen 22 merekan 134 ce oleh 17	Secretaria.
Melling Address PO Box 433		•	
City Colebrook	Sala NH	Zin Code	03576
City: Colebrook Telephone (Daytime): 603-496-3504	(Evenino):	manuscription and by Approximate and by Approximate a	
Facsimile Number: 603-386-0242	E-Mail Address	david@smartenergyr	ne.com
Electrical Contractor Contact Information (if appropri		<u> </u>	
		Telephone:	
Mailing Address	State	7in Code	
Facility Information: Address of Facility: City: Electric Service Company: PSNH Account N Electricity Supply Company: Glacier Energy	State	Zip Code:	
Electric Service Company: PSNH Account N	lumber: 564711	51043 Meter Number:	16565609
Electricity Supply Company: Glacier Energy		Account Numbe	. 35443341
Generator/Inverter Manufacturer: Fronius	_ Model Name and	1 Number: IG Plus 10.0-1.)uantity:
Nameplate Rating: 10 (kW) (kVA)	240 (AC Val	its) Single 🗹 or Three	Frase
System Design Capacity: 10.5 (kVA)	_(kVA) Battery E	Backup: Yes <u>N</u>	o V
Net Metering: If Renewably Fueled, will the acco			
Prime Mover: Photovoltaic ☐ Reciprocating E			
Energy Source: Solar ☑ Wind ☐ Hydro ☐ D			
UL 1741.1 (IEEE 1547.1) Listed? Yes No		ternal Manual Disconnect: (G	∌ No
Estimated Install Date: Sep 8th	Estimated In-Serv	ice Date: Sep 30th	
Interconnecting Customer Signature			
I hereby certify that, to the best of my knowledge, at Terms and Conditions on the following confidence	I of the information	SECRETARY-	strue and I agree to the
Customer Signature / UU / 1		Title <u>TREASURER</u> D	ac Olay
Please attach any sife umentation provided by the in	werter manufactur	er describing the inverter's U	L 1741 Ilţiing.
Approval to Install Facility (For Company use only)			
Installation of the Facility is approved contingent up system modifications, if required (Are system modifications)	on the terms and co	notitions of this Agreement, ar	nd agreement to any ined)
Company Signature: THERNO BAH	IMC,	Title Associate Eng D	
ι	11/2 H()	Ø	* /

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					
Contact Person, if Company: MAILY	op International INC Geographic 3					
City: Cole GILOOK	State: Zip Code:					
Telephone (Daytime): 603.33784880	* (Evening):					
Facsimile Number:	E-Mail Address: MARCY & Khoop Intercontional com					
Address of Facility (if different from above):						
City:	State: Zip Code:					
Generation Vendor: Suc Aut Swift Swift	Contact Person: David BELANDER					
Therby certify that the system hardware is in compl	State: Zip Code: Contact Person: David BE (AugerC iance with Puc 900.					
Theory coming that the cystem manufacture is in escape	•					
Vendor Signature:	Date: 09-71-3011					
V						
Flectrical Contractor's Name (if appropriate):	on team					
Mailing Address:						
	State: Zip Code:					
Telephone (Daytime):	(Evening):					
Facsimile Number:	E-Mail Address:					
License number: 10.7744						
Date of approval to install Facility granted by the Company: $8-30-301$ Installation Date: $9-21-301$						
Application ID number: N 2392						
Inspection:						
The system has been installed and inspected in com-	apliance with the local Building/Electrical Code of					
No Local	Inspector					
(City/County)						
Signed (Local Electrical Wiring Inspector, or attack	n signed electrical inspection):					
Name (printed):						
Date:						
Customer Certification:						
thereby certify that, to the best of my knowledge, a correct. This system has been installed and shall be initial start up test required by Puc 905.04 like been Customer Signature:	all the information contained in this Interconnection Notice is true and e operated in compliance with applicable electrical standards. Also, the successfully completed. Date: 7/2///					

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

Simplified Process Interconnection Application and Service Agreement

		0.04.004	4	60
Contact Information:	-	red: 8-24-201	<u></u>	Ö
Legal Name and Address of Interconnecting Customes	r (or, Company nam	ne, if appropriate)		
Customer or Company Name (print): Kheops Int	ernational inc			
Contact Person, if Company: Mary Gueymard				 -
Mailing Address 232 US Rout #3			00070	
City: Calebraak	Sale NH	Z	ip Code: U35/6	
Telephone (Daytime): 603-238-8188 ext 226	(Evening):			
Facsimile Number:				
Alternative Contact Information (e.g., system installation		ordinating compan	y, if appropriate):	
Name: Smart Energy of New England LL	.C.			************
Mailing Address: PO Box 433		, described to the second to t		
City: Colebrook	State: NH _	Z	Tip Code: <u>035/6</u>	·
City: Colebrook Telephone (Daytime): 603-496-3504	(Evening):	<u> </u>		
Facsimile Number: 603-386-0242	E-Mail Address _	david@smarte	energyne.com	
Electrical Contractor Contact Information (if appropria	ale):			
Name Part of team		Telephone:		
Malling Address				
City:	State:	Z	Tip Code:	
Facility Information:			•	
Address of Facility:				
City: Account Nu Electric Service Company: PSNH Account Nu Electricity Supply Company: Glacier Energy	States	Z	ip Code:	
Electric Service Company: PSNH Account Nu	mber: 504/115	1043 Meter	Number: 10000009	
Electricity Supply Company: Glacier Energy		Accour	nt Number: 35443341	_
Generator/Inverter Manufacturer: Fronius	Model Name and I	Numberl <u>G Plus</u>	<u>10.0-</u> 1).cantity: <u>1</u>	
Nameplate Rating: 10 (kW) (kVA) 2				
System Design Capacity: 10.5 (kVA)				
Net Metering: If Renewably Fueled, will the accou				
Prime Mover: Photovoltaic 🖸 Reciprocating Eng				
Energy Source: Soler⊠ Wind ☐ Hydro ☐ Die	esei 🗌 Natural Ga	s 🗌 Fuel Oil 🔲 🔻	Other	
UL 1741.1 (IEEE 1547.1) Listed? Yes 🗸 No_	Exte	mal Manual Discor	nnect: (es No	
Estimated Install Date: Sep 8th	Estimated In-Servic	a Date Sep 30	th_	
nterconnecting Customer Signature				
hereby certify that, to the best of my knowledge, all o	of the information p	rovided in this app	kication is true and I agre	a to the
Ferms and Conditions on the full owner of the Customer Signature	•	SECRETA	ey-	7
Sustomer Signature / UUS	T	the <u>TREASUR</u>	ER Date 8/2	<u>4 [11</u>
Please attach any Mocumentation provided by the inv	erter manufactures	describing the inv	verter's UL 1741 litting.	1
Annual to leviel Emility (For Commercial				
Approval to Install Facility (For Company use only)				
nstallation of the Facility is approved contingent upor system modifications, if required (Are system modific	i u le terms end cont elions renvired? Ye	B No L TAR	खाला, काव agreement to e Determined । \	ary
Company Signature THERNO RAH		Tile Associate		رزاه
J. J.	10:36	1100 11000 110	- 3/3	-/-
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