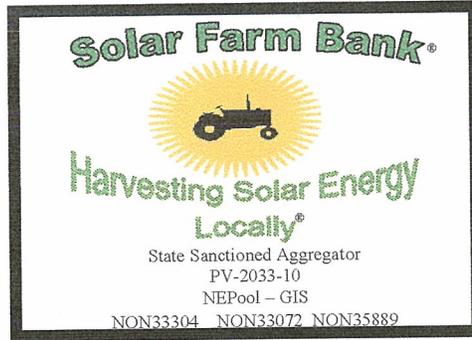


DE 13-104



April 4, 2013

Ms. Debra Howland
Executive Director and Secretary
State of New Hampshire Public Utilities Commission
21 S. Fruit Street Suite 10
Concord, NH 03301-2429



Ms. Howland,

Solar Farm Bank LLC (SFB) New Hampshire Certification Code NH-II-13-O10 requests the New Hampshire Public Utilities Commission (Commission) grant its approval and certification of our account for Class II REC for the photovoltaic array of:

George Fletcher
271 Little Bay Road
Newington NH, 03801
Telephone # 603-431-7188
Email: rkfletcher@comcast.net

In Support of the request for Class II eligibility for the George Fletcher, SFB submits an original and two copies of the completed application, required documentation and supplemental supporting information.

Thank you for your consideration of SFB's request. If you have any questions or need additional information, please contact me directly.

Stephen Hirsh,

President

Solar Farm Bank LLC. 508-259-2419
Mailing address: P O Box 24 Medway, MA 02053
Office address: 205 Shaw Farm Rd Holliston, MA 01746
Solarfarmbank@gmail.com



State of New Hampshire
Public Utilities Commission



21 S. Fruit Street, Suite 10, Concord, NH 03301-2429

**DRAFT APPLICATION FORM FOR
RENEWABLE ENERGY SOURCE ELIGIBILITY FOR CLASS I AND CLASS II
SOURCES WITH A CAPACITY OF 100 KILOWATTS OR LESS**

Pursuant to New Hampshire Administrative Code [Puc 2500](#) Rules including Puc 2505.08, Certification of Certain Customer-Sited Sources

- Please submit one (1) original and two (2) paper copies of the completed application and cover letter* to:

Debra A. Howland
Executive Director

New Hampshire Public Utilities Commission
21 South Fruit Street, Suite 10
Concord, NH 03301-2429

- Send an electronic version of the completed application and the cover letter electronically to executive.director@puc.nh.gov.

* The cover letter must include complete contact information and identify the renewable energy class for which the applicant seeks eligibility. Pursuant to Puc 2505.01, the Commission is required to render a decision on an application within 45 days of receiving a completed application.

If you have any questions please contact Barbara Bernstein at (603) 271-6011 or Barbara.Bernstein@puc.nh.gov.

Check the applicable class:

Eligibility Requested for Class I Class II

Applicant Name: George and Ruth Fletcher

Mailing Address: 271 Little Bay Road

Town/City: Newington State: NH Zip Code: 03801

Primary Contact: George Fletcher

Telephone: 603-431-7198 Cell: ---

Email address: rkfletcher@comcast.net

The facility name and contact information (if different than applicant contact information).

Facility Name: _____

Mailing Address: _____

Town/City: _____ State: _____ Zip Code: _____

Primary Contact: _____

Telephone: _____ Cell: _____

Email address: _____

Provide a complete list of the equipment used at the facility, including the meter, and, if applicable, the inverter:

quantity		quantity	
20	Solar World SW245 Watt Modules	1	GE, Kilowatt Hour Utility Meter with EZ Read 100A, 120/240VAC, CEC Approved
1	Solectria Renewables PVI-5000 Inverter	1	Solren View Monitoring
1	Racking (Roof Mount)		

What is the nameplate capacity of your facility? 4.90 kW (DC)

What was the initial date of operation? September 24, 2012

*This is typically included in the interconnection agreement. Provide this documentation as **Attachment A**.*

Provide the name, license number and contact information of the installer, or indicate that the equipment was installed directly by the customer.

Installer Name: Harmony Energy Works Incorporated

Installer Address: 10 Gale Rd

License #: NABCEP PV Installer #032611-147

Town/City: Hampton State: NH Zip Code: 03842

Telephone: 603-926-3366 Cell: 603-512-3377

Email address: _____

If the equipment was installed directly by the customer, please check here:

Provide the name and contact information of the equipment vendor:

Check here if the installer and the equipment vendor were one and the same.

Business Name: _____

Vendor's Name: _____

Business Address: _____

Town/City: _____ State: _____ Zip Code: _____

Telephone: _____ Cell: _____

Email address: _____

If an independent electrician was used, please provide the following information:

Electrician's Name: Paul Miner

Business Name: Miner Electric

Business Address: 9 Tansy Lane

Town/City: Stratham State: NH Zip Code: 03885

License # 3941M

Provide the name and contact information of the independent monitor for this facility.

(A [list](#) of independent monitors is available at:

http://www.puc.nh.gov/Sustainable%20Energy/Renewable_Energy_Source_Eligibility.htm.)

Independent Monitor's Name: Paul Button

Town/City: Manchester State: NH Zip Code: 03104

Telephone: 603-617-2469 Cell: 603-836-4402

Email address: pbutton@energy-audits-unltd.com

Provide documentation of the applicable distribution utility's approval of the installation (This is usually included in the interconnection agreement.) If this documentation is separate from the interconnection document, please provide this as **Attachment B**.

Is the facility certified under another state's renewable portfolio standard? yes _____ no
If "yes", then provide proof of the certification as **Attachment C**.

In order to qualify your facility's electrical production for Renewable Energy Certificates (RECs), you **must register with the NEPOOL – GIS. Contact information for the GIS administrator follows:**

James Webb
Registry Administrator, APX Environmental Markets
224 Airport Parkway, Suite 600, San Jose, CA 95110
Office: 408.517.2174
jwebb@apx.com

Mr. Webb will assist you in obtaining a GIS facility code and, if applicable, an ISO-New England asset ID number.

GIS Facility Code # NON 35889 Asset ID # _____

Complete an attestation by the applicant that the project is installed and operating in conformance with any applicable state/local building codes. Use either the following attestation or provide a separate document as **Attachment D**.

AFFIDAVIT

The Undersigned applicant declares under penalty of perjury that the project is installed and operating in conformance with all applicable building codes.

Applicant's Signature *[Handwritten Signature]* Date 4/4/2013

Applicant's Printed Name Stephen Hirsh

Subscribed and sworn before me this 4th Day of April (month) in the year 2013

County of Worcester State of Massachusetts

[Handwritten Signature]
Notary Public/Justice of the Peace

My Commission Expires April 11 2019



CHECK LIST: The following has been included to complete the application:	YES
• All contact information requested in the application.	
• A copy of the interconnection agreement, nameplate capacity and date of operation (Attachment A.)	
• Documentation of the distribution utility's approval of the installation.* (Attachment B.)	
• If the facility is participating in another state's renewable portfolio standard (RPS) program, documentation of certification in other state's RPS. (Attachment C).	
• A signed and notarized attestation or Attachment D.	
• A GIS number has been obtained.	
• The distribution utility's approval of the installation.*	
• The document has been printed and notarized.	
• The original and 2 copies are included in the packet mailed to Debra Howland, Executive Director of the PUC.	
• An electronic version of the completed application has been sent to executive.director@puc.nh.gov .	
*Usually included in the interconnection agreement. If the interconnection agreement contains this information, attachment B is not necessary.	

PREPARER'S INFORMATION

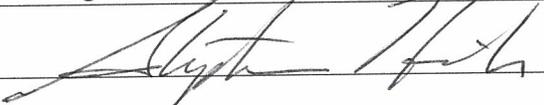
Preparer's Name: Solar Farm Bank LLC / Stephen Hirsh

Mailing Address: 205 Shaw Farm Rd

Town/City: Holliston State: MA Zip Code: 01746

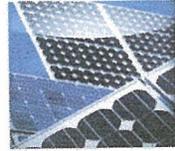
Telephone: 508-893-8993 Fax 508-893-8991 Cell: 508-259-2419

Email address: Solarfarmbank@gmail.com or solarfarmbank@verizon.net

Preparer's Signature:  *SFB president*



10 Gale Rd
Hampton, NH 03842
603-926-3366



**GEORGE FLETCHER –
COMMISSIONING REPORT & CERTIFICATION OF SYSTEM OPERATION**

I am pleased to present this Letter of Certification in regards to the 4.9 kW - DC (STC) solar photovoltaic (PV) system installed at 271 Little Bay Road, Newington, NH. In my role and capacity as PV Project Manager for the above installation, I do hereby certify that the 4.9 kW PV system has been inspected, commissioned, and interconnected with the grid and was officially placed in service on September 24, 2012. The project was installed and is operating in conformance with any applicable state/local building codes. The 4.9 kW PV system consists of 20 – 245 Solar World solar modules, 1 Solectria PVI-5000 inverter, a revenue-grade solar production meter and AC disconnect. All solar PV panels, inverters, and balance of system equipment are operating properly and as designed. The power output of the solar PV system is being fed into the PSNH grid as per the terms and conditions of the PSNH Standard Interconnection Agreement and *CHAPTER PUC 900 Net Metering For Customer-Owned Renewable Energy Generation Resources Of 1000 Kilowatts Or Less* of the NH Public Utility Commission (NHPUC).

Sincerely,

A handwritten signature in black ink, appearing to read "G. Horrocks", written over a light blue horizontal line.

George Horrocks
President
Harmony Energy Works Incorporated
NABCEP PV Installer #032611-147
603-926-3366
george.horrocks@harmonyenergyworks.com

ATTACHMENT A

RECEIVED
SEP 19 2012

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

BY:.....

Simplified Process Interconnection Application and Service Agreement

Contact Information: Date Prepared: 9/4/2012
Legal Name and Address of Interconnecting Customer (or Company name, if appropriate):
Customer or Company Name (print): Ruth Fletcher
Contact Person, if Company:
Mailing Address: 271 Little Bay Road
City: Newington State: NH Zip Code: 03801
Telephone (Daytime): 603-431-7198 (Evening): 603-431-7198
Facsimile Number: E-Mail Address: rkfletcher@comcast.net

Alternative Contact Information (e.g., system installation contractor or coordinating company, if appropriate):
Name: Harmony Energy Works Incorporated
Mailing Address: 10 Gale Rd
City: Hampton State: NH Zip Code: 03842
Telephone (Daytime): 603-926-3366 (Evening):
Facsimile Number: E-Mail Address:

Electrical Contractor Contact Information (if appropriate):
Name: Miner Electric / Paul Miner Telephone: 603-772-6807
Mailing Address: 9 Tansy Lane
City: Stratham State: NH Zip Code: 03885

Facility Information:
Address of Facility: 271 Little Bay Road
City: Newington State: NH Zip Code: 03801
Electric Service Company: PSNH Account Number: 56206590036 Meter Number: 75522192
Inverter Manufacturer: Solectria Renewables Model Name and Number: FVI-5000 Quantity: 1
Nameplate Rating: 4.9 (kW) 4.968 (kVA) 240 (AC Volt) Single X or Three Phase
System Design Capacity: 4.9 (kVA) (kVA)
Net Metering: Renewable 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 (IEEE 1547.1) Listed? Yes No
Estimated Install Date: 9/17/2012 Estimated In-Service Date: 9/21/2012

5.0KW

821202371
HOT WATER MTR
882722632

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: Ruth K. Fletcher Title: Homeowner Date: 9/4/2012
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: Michael Moffa Title: SR. ENGINEER Date: 9-19-12

PORTSMOUTH 3850 X 6 B P. 9-4A MAPA PH. 3 25KVA
PORTSMOUTH E/E NON-PTF

ATTACHMENT B

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
Customer or Company Name (print): Ruth Fletcher
Contact Person, if Company: _____
Mailing Address: 271 Little Bay Road
City: Newington State: NH Zip Code: 03801
Telephone (Daytime): 603-431-7198 (Evening): _____
Facsimile Number: _____ E-Mail Address: rkfletcher@comcast.net

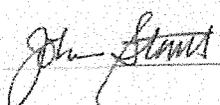
Address of Facility (if different from above): _____
City: _____ State: _____ Zip Code: _____
Generation Vendor: Harmony Energy Works Incorporated Contact Person: George Horrocks
I hereby certify that the system hardware is in compliance with Pue 900.

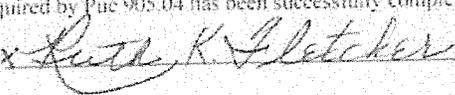
Vendor Signature:  Date: 9/21/2012

Electrical Contractor's Name (if appropriate): Paul Miner / Miner Electric
Mailing Address: 9 Fanny Lane
City: Stratham State: New Hampshire Zip Code: 03885
Telephone (Daytime): 603-772-6807 (Evening): 603-772-6807
Facsimile Number: _____ E-Mail Address: minerelectric@comcast.net
License number: 3948M

Date of approval to install Facility granted by the Company: 9/19/2012 Installation Date: 9/21/2012

Application ID number: **#N2570**

Inspection:
The system has been installed and inspected in compliance with the local Building/Electrical Code of
Newington NH, Rockingham County
(City/County)
Signed (Local Electrical Wiring Inspector, or attach signed electrical inspection): 
Name (printed): JOHN STOWELL
Date: 9-24-2012

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, the initial start up test required by Pue 905.04 has been successfully completed.
Customer Signature:  Date: 9/12/12