

NHPUC JUL08'13 AM11:39

July 5, 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:

Windy Ridge Corp.
 P.O. Box 32
 190 Qssipee Mtn, Highway
 Tanworth NH 03866
 Telephone # 603-323-2323
 Email: Tim@windyridgecorp.com

In Support of the request for Class II eligibility for the Tim Brown c/o Windy Ridge Corp , 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: Windy Ridge Corp. Tim Brown

Mailing Address: P.O. Box 32, 190 Ossipee Mtn. Highway

Town/City: Tamworth NH 03886

Primary Contact: Tim Brown

Telephone: 603-323-2323 603-387-6878

Email address: Tim@windyridgecorp.com

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	
80	SUNIVA OPT-265-60-4-100 Module	1	3 Phase 480Volt KWH Meter
2	Power One PVI-10.1 Inverter		
560'	UniRac Solar Mt. Rail		

What is the nameplate capacity of your facility? 20KW
(based on the size of the inverter(s)) _____

What was the initial date of operation? 5/29/13
*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: Frase Electric LLC

Installer Address: 789 Whittier Highway

License #: 4146M

Town/City: South Tanworth State: NH Zip Code: 03883

Telephone: 603-284-6618 Cell: 603-387-0873

Email address: kfrase@hughes.net

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: Same as above
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: Same as above
Business Name: _____
Business Address: _____
Town/City: _____ State: _____ Zip Code: _____
License # _____

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

(A [list](http://www.puc.nh.gov/Sustainable%20Energy/Renewable_Energy_Source_Eligibility.htm) 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 X
If "yes", then provide proof of the certification as **Attachment C**.

Attachment D

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 [Signature] Date 7/15/2013

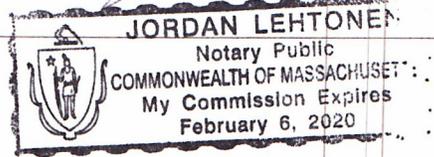
Applicant's Printed Name Stephen Hirsch

Subscribed and sworn before me this 5th Day of July (month) in the year 2013

County of Middlesex State of Massachusetts

[Signature] Notary Public/Justice of the Peace

My Commission Expires



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

PREPARER'S INFORMATION

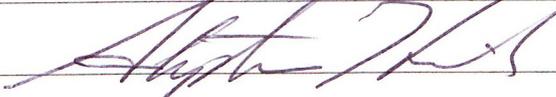
Preparer's Name: Solar Farm Bank LLC / Stephen Hirsh

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

Attachment
A

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

RECEIVED
APR 15 2013
SESD

Simplified Process Interconnection Application and Service Agreement

Contact Information:

Date Prepared: 4-9-2013

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

Customer or Company Name (print): Windy Ridge Corporation

Contact Person, if Company: Tim Brown

Mailing Address: P.O. Box 32

City: Tamworth State: NH Zip Code: 03886

Telephone (Daytime): 603-323-2323 (Evening): 603-387-6878

Facsimile Number: 603-323-2322 E-Mail Address: tim@windyridgecorp.com

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

Name: Frase Electric

Mailing Address: 789 Whittier Highway

City: So. Tamworth State: NH Zip Code: 03883

Telephone (Daytime): 603-284-6618 (Evening): Same

Facsimile Number: 603-284-6343 E-Mail Address: KFRASE@Hughes.net

Electrical Contractor Contact Information (if appropriate):

Name: FRASE ELECTRIC INC Telephone: 603-284-6618

Mailing Address: 789 Whittier Hwy

City: So. Tamworth State: NH Zip Code: 03883

Facility Information:

Address of Facility: 190 Ossipee Mtn. Highway (Rt. 25)

City: Tamworth State: NH Zip Code: 03886

Electric Service Company: PSNH Account Number: 56785841057 Meter Number: 522181387

Electricity Supply Company: PSNH Account Number: 56785841057*

Generator/Inverter Manufacturer: PowerOne-Aurora Model Name and Number: PU-10.0-1^{OUTP-45} Quantity: 2

Nameplate Rating: 10kW x 2 (kW) (kVA) (AC Volts) Single or Three Phase

System Design Capacity: 20 kW (kVA) Battery Backup: Yes (No)

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 External Manual Disconnect Yes No

Estimated Install Date: 5/15/13 Estimated In-Service Date: 5/15/13

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: Tim Brown, pres. Title: Pres. Date: 4-9-13

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 Motta Title: SR. ENGINEER Date: 4-17-13

66-785841057

Attachment B
pg 2

RECEIVED
MAY 28 2013
SESD

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): Windy Ridge Corporation
Contact Person, if Company: Tim Brown
Mailing Address: P.O. Box 32
City: Tamworth State: NH Zip Code: 03886
Telephone (Daytime): 603-323-2323 (Evening): 603-387-6878
Facsimile Number: 603-323-2322 E-Mail Address: minus320@ncia.net

Address of Facility (if different from above): 190 Ossipee Mtn. Highway (Route 25)
City: Tamworth State: NH Zip Code: 03886
Generation Vendor: PSNH Contact Person: Tim Brown

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

Vendor Signature: [Signature] Date: 5/23/13

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

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

Application ID number: _____

Inspection:

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

N/A - see Attached Letter - [Signature]
(City/County)

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

Name (printed): Kim Frase - FRASE ELECTRIC LLC

Date: 5/23/13

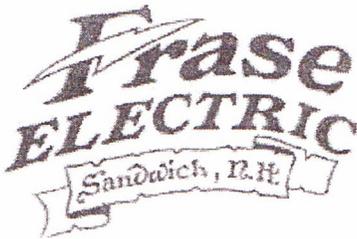
Customer Certification:

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 Puc 905.04 has been successfully completed.

Customer Signature: Tim Brown, pres. Date: 5/23/13

Attachment B
pg 2

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MAY 28 2013
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L.L.C.

Kim Frase - NH Lic #4146
Phone - 603-284-6618
Fax - 603-284-6343
789 Whittier Highway
South Tamworth, N.H. 03883
Email - kfrase@hughes.net

DATE: MAY 17, 2013

JOB NAME: WINDY RIDGE CORPORATION

To: MICHAEL MOTTA

FRASE ELECTRIC LLC HAS INSPECTED THE PV INSTALLATION AT 190 OSSIPEE MOUNTAIN HIGHWAY, TAMWORTH, NEW HAMPSHIRE.

TO THE BEST OF MY KNOWLEDGE IT HAS BEEN INSTALLED TO MEET ALL STATE AND FEDERAL ELECTRIC CODES AS WELL AS POWER COMPANY REQUIREMENTS

THANK YOU FOR YOUR BUSINESS

SINCERELY,

KIM FRASE