



DE 14-151

Knollwood Energy of MA LLC
PO Box 30
Chester, New Jersey 07930

October 8, 2014

NHPUC 20OCT'14AM11:25

Debra A. Howland
Executive Director
New Hampshire Public Utilities Commission
21 South Fruit Street, Suite 10
Concord, NH 03301-2429

Dear Ms Howland,

Enclosed please find the application for the Eaton Door and Frame system expansion to be part of the Knollwood Energy of MA LLC (NH-II-13-089) Class II Solar Photovoltaic aggregation for New Hampshire Renewable Energy Certificates (RECs) generated from customer-sited sources, pursuant to New Hampshire Code of Administrative Rules Puc 2506.

Customer and Facility Information

Existing docket 14-151
System Expansion

Eaton Door and Frame
3 Industrial Way
Salem, NH 03079
bvinnacombe@eatondoорandframe.com
603-893-5083

The Nepool GIS ID # for this facility is: NON40970 Also enclosed are the Simplified Process Interconnection Application and the Service Agreement and the Certificate of Completion for Simplified Process Interconnections. An electronic version has been sent to executive.director@puc.nh.gov.

Please do not hesitate to contact me if you have any questions regarding this application.

Thank you for your consideration.

Alane Lakritz

Alane Lakritz
President
Knollwood Energy of MA LLC
862-432-0259
Alane@KnollwoodEnergy.com

Enclosures (3)



State of New Hampshire Public Utilities Commission

21 S. Fruit Street, Suite 10, Concord, NH 03301-24



DRAFT APPLICATION FORM FOR RENEWABLE ENERGY CERTIFICATE (REC) 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.

***Photovoltaic (PV) solar facilities are Class II resources. Contact Barbara.Bernstein@puc.nh.gov for assistance.**

Eligibility Requested for: Class I Class II ☒ **Check here X if this facility part of an aggregation.**

If the facility is part of an aggregation, please list the aggregator's name.

Knollwood Energy of MA

***Provide the following information for the owner of the PV system.**

Applicant Name Eaton Door and Frame Email bvinnacombe@eatondoorsandframe.co
Address 3 Industrial Way City Salem State NH Zip 03079
Telephone 603-893-5083 Cell _____

***For business applicants, provide the facility name and contact information (if different than applicant contact information).**

Facility Name Eaton Door and Frame Primary Contact Beth Vinnagro
 Address 3 Industrial Way City Salem State NH Zip 3079
 Telephone 603-893-5083 Cell _____
 Email address: BVinnacombe@eatondoorandframe.com

***Provide a complete list of the equipment used at the facility, including the revenue grade REC meter, and, if applicable, the inverter. Your facility will not qualify for RECs without a REC meter.**

equipment	quantity	Type	quantity	Type
PV panels	84	SolarWorld SW250-Poly	252 total	existing +expansion
Inverter	84	Enphase M215	252 total	existing +expansion
meter	1	Energy Tracking eV333	existing	existing meter used for both

***A copy of the interconnection agreement and the approval to operate your PV system from your electric utility must be included with your application.**

***For PSNH customers, both the Simplified Process Interconnection Application and Exhibit B – Certificate of Completion are required.**

What is the nameplate capacity of your facility (found on your interconnection agreement)? 21DC, 18.06AC expansion

What was the initial date of operation (the date your utility approved the facility)? 6/3/2014

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

Installer Name Bright Light Solar Contact Vladimir Hromis License # (if applicable) _____
 Address 275 Bear Hill Road City Chichester State: NH Zip 03258
 Telephone 603-731-3169 email Vladimirhromis@blsus.com

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

***Provide the name and contact information of the equipment vendor.**

X Check here if the installer provided the equipment and proceed to the next question.

Business Name _____ Contact _____

Address _____ City _____ State _____ Zip _____

Telephone _____ email _____

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

Electrician's

Name Lenn Johnson License # 8033

Business Name Lenn Johnson Electric Email lennstang@comcast.net

Address 454 Micol Road City Pembroke State NH Zip 03275

***Provide the name of the independent monitor for this facility.** (A list of approved independent monitors is available at http://www.puc.nh.gov/Sustainable%20Energy/Renewable_Energy_Source_Eligibility.htm.)

Independent Monitor's

Name Tom Kelly Natural Capital LLC

Is the facility certified under another state's renewable portfolio standard? yes nox

If "yes", then provide proof of the certification as **Attachment C**.

- Please note, if your facility is part of an aggregation, your aggregator should provide you with the following information.
- 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

If you are not part of an aggregation, Mr. Webb will assist you in obtaining a GIS facility code.

GIS Facility Code

NON40970 Asset ID # NON40970

•Complete an affidavit by the applicant or qualified installer that the project is installed and operating in conformance with any applicable state/local building codes. Use either the following affidavit form or provide a separate document.

•The Commission requires a notarized affidavit as part of the application.

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

Alane Lakritz

Date

10/3/14

Applicant's Printed
Name

Alane Lakritz

Subscribed and sworn before
me this

3

Day of

October

(month) in the year

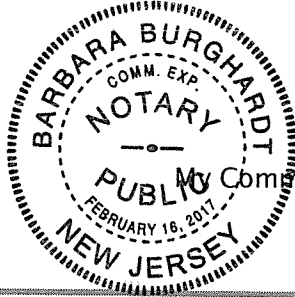
2014

County of

Morris

State of

New Jersey



Barbara Burghardt
Notary Public/Justice of the Peace

My Commission Expires

•Complete the following checklist. If you have questions, contact barbara.bernstein@puc.nh.gov.

CHECK LIST: The following has been included to complete the application:	YES
• All contact information has been provided.	X
• A copy of the interconnection agreement. PSNH Customers should include both the Interconnection Standards for Inverters Sized up to 100 KVA <u>and</u> Exhibit B – Certification of Completion for Simplified Process Interconnection.	x
• Documentation of the distribution utility's approval of the installation.*	x
• If the facility is participating in another state's renewable portfolio standard (RPS) program, documentation of certification in other state's RPS.	

*Usually included in the interconnection agreement.

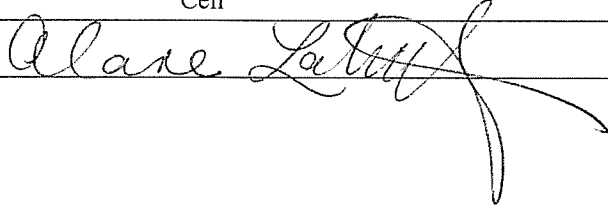
☐ If the application has been prepared by someone other than the applicant, complete the following.
If the application was prepared by the applicant, check here and skip this section.

PREPARER'S INFORMATION

Preparer's Name Alane Lakritz Email address: alane@knollwoodenergy.com

Address PO Box 30 City Chester State NJ Zip 07930

Telephone 862-432-0590 Cell _____

Preparer's Signature: 

Simplified Process Interconnection Application and Service Agreement

Contact Information:

Date Prepared: 7/2/12

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

Customer or Company Name (print): Salem Power & Light Contact Person, if Company: Jim Margolis

Mailing Address: 3 Industrial Way

City: Salem State: NH Zip Code: 03079 E-Mail: jmargolis@salp.com

Telephone (Daytime): (603) 893-2222 (Evening): (603) 893-2222 Facsimile Number:

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

Name: Beth Vinciguerra

Mailing Address: 3 Industrial Way

City: Salem State: NH Zip Code: 03079 E-Mail: bvinciguerra@salp.com

Telephone (Daytime): (603) 893-2222 (Evening): (603) 893-2222 Facsimile Number: (603) 893-2222

Electrical Contractor Contact Information (if appropriate):

Name: John P. Pappas Electric Telephone: (603) 496-3991

Mailing Address: 654 Mt. Road Rt.

City: Plainville State: NH Zip Code: 03275

Facility Information:

Address of Facility: 3 Industrial Way

City: Salem State: NH Zip Code: 03079

Electric Supply Co: Liberty Utility Acct #: 02956-02015 Meter #: 02182400

Gen/Inverter Manner: 5 phase Model Name and #: Euphonia M-715 Quantity: 84

Nameplate Rating: 0.215 (kW) (kVA) 207 (AC Volts) Single or Three 1 Phase

System Design Capacity: 18 (kW) (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: 5/1/2014 Estimated In-Service Date: 6/1/2014

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: [Signature] Title: President Date: 7/2/12

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: [Signature] Title: Engineering Date: 8/26/14

Company waives inspection/Witness Test? Yes: X No:

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

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

Exhibit B - Certificate of Completion for Simplified Process Interconnections

Installation Information:

☐ Check if owner-installed

Customer or Company Name (print): <u>Eaton Door and Frame</u>		Contact Person, if Company: <u>Beth Vinnacombe</u>	
Mailing Address: <u>3 Industrial way</u>			
City: <u>Salem</u>	State: <u>NH</u>	Zip Code: <u>03079</u>	E-Mail Address: <u>bvinnacombe@eatondoorandframe.com</u>
Telephone (Daytime): <u>(603) 893-8375</u>	(Evening): <u>(603) 486-5700</u>	Facsimile Number: <u>(603) 893-3974</u>	
Address of Facility (if different from above): 			
City: 	State: 	Zip Code: 	
Generation Vendor: 		Contact Person: 	

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

Vendor Signature: _____ Date: _____

Electrical Contractor's Name (if appropriate): <u>Lenn Johnson</u>		License number: <u>8633</u>	
Mailing Address: <u>454 M. col Rd</u>			
City: <u>Pembroke</u>	State: <u>NH</u>	Zip Code: <u>03275</u>	E-Mail Address: <u>lennsteng@comcast.net</u>
Telephone (Daytime): <u>(603) 496-3990</u>	(Evening): <u></u>	Facsimile Number: <u></u>	

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

Salem / Rockingham
(City/County)

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

Name (printed): Blake G Miller Date: 6/3/2012

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