INSTRUCTIONS

SUBMIT THIS FORM DIRECTLY TO YOUR ELECTRIC PROVIDER

Notice: This form must be completed and submitted with fees to meet Wisconsin Admin. Code PSC 119.04 (2). Personal information collected will be used for administrative purposes only.

This application form is for interconnection to the electric distribution system of distributed generation systems sized up to 15 megawatts (MW) alternating current (AC) and associated equipment in compliance with Wisconsin Administrative Code Chapter PSC 119. For distributed generation systems that are DC rated, if applicable, please use the conversion factor provided by your utility to determine the AC nameplate rating of the system.

If a distributed generation system already has an interconnection agreement but has simply changed ownership, do not fill out this form. Fill out Form, "Change of Ownership Form for Distributed Generation Equipment." If this generation system is planned in conjunction with construction of a new building, provide the current owner/builder's information as the Applicant, and have the new home/building purchaser fill out a "Change of Ownership" Form upon completion of sale.

This form is for generation systems that will operate in parallel with the distribution grid. If the system you are considering will operate only in isolation from the electric distribution grid, you do not need to fill out this form.

FEES: Table 119.08-1						
Category	Export Capacity	Application Review Fee	Engineering Review Fee	Distribution System Study Fee	Commissioning Fee	
1	20 kW or less	\$150 (1-8 kW) / \$300 (9-20 kW)	Cost based	Cost based	\$150	
2	Greater than 20 kW to 200 kW	\$300 + \$10 / kW	Cost based	Cost based	\$250	
3	Greater than 200 kW to 1 MW	\$2,000 + \$2 / kW	Cost based	Cost based	\$1,000	
4	Greater than 1 MW to 15 MW	\$4,000 + \$0.50 / kW	Cost based	Cost based	\$2,500	

An applicant seeking to interconnect a distributed generation facility to the distribution system of a public utility shall maintain liability insurance equal to or greater than the amounts stipulated in Table 119.05–1, per occurrence, or prove financial responsibility by another means mutually agreeable to the applicant and the public utility.

INSURANCE REQUIREMENTS: Table 119.05-1					
Category	Generation Capacity (AC)	Minimum Liability Insurance Coverage			
1	20 kW or less	\$300,000			
2	Greater than 20 kW to 200 kW	\$1,000,000			
3	Greater than 200 kW to 1 MW	\$2,000,000			
4	Greater than 1 MW to 15 MW	Negotiated			

NAME AND ADDRESS OF ELECTRIC SERVICE PROVIDER						
NAME	MAILING ADDRESS	CITY		STATE	ZIP CODE	EMAIL
SIZE CATEGORY APPLICABLE TO THIS APPLICATION						
Category 1 (20 kW or less)		Category 2 (Greater than 20 kW to 200 kW)				
Category 3 (Greater than 200 kW to 1 MW)			Category 4 (Greater than 1 MW to 15 MW)			

1. APPLICANT CON	TACT INFORMATI	ON				
Under PSC 119.02(2), "Athe public utility's distribu		egally responsible person applyi	ing to a public utility to i	nterconnect a	distributed generation facility to	
LAST NAME		FIRST NAME	FIRST NAME		MIDDLE NAME	
COMPANY (IF APPLICABLE)		REPRESENTATIVE (IF APPLI	REPRESENTATIVE (IF APPLICABLE)		TITLE	
STREET ADDRESS		CITY	CITY STATE		COUNTY	
PRIMARY PHONE NUMBER	R	ADDITIONAL EMERGENCY P	ADDITIONAL EMERGENCY PHONE		EMAIL ADDRESS	
2. LOCATION OF TH	IE GENERATION S	SYSTEM	SAMI	E AS APPLI	CANT ADDRESS ABOVE	
STREET ADDRESS (IF DIFFERENT)		CITY		STATE ZIP CODE		
PRIMARY PHONE NUMBER		ADDITIONAL EMERGENCY F	ADDITIONAL EMERGENCY PHONE		ELECTRIC SERVICE ACCOUNT NUMBER	
METER NUMBER		LATITUDE – LONGITUDE (OI	LATITUDE – LONGITUDE (OPTIONAL)		COUNTY	
Does this application rela If there is already genera	ate to a change or mo ation at the point of int	dification of an existing system? erconnection, this is a modification	on.			
Yes, this is a modification No, there is no generation currently at this point of interconnection					is point of interconnection	
3. CUSTOMER TYP	E					
Residential Other	☐ Farm	Commercial	Industrial		Independent Power Producer	
4. APPLICANT'S OV	WNERSHIP INTER	EST IN THE GENERATION :	SYSTEM			
Owner	Co-owner	Other	Other			
5. TYPE OF THE GE	ENERATION SYST	EM				
Solar PV Other	☐ Wind	Hydropower	Biomass		Storage	
Fill out appropriate tech	nology-based attachm	ent.				

6. PRIMARY INTENTION OF GENERATION SYSTEM						
 □ Net Metering □ Certified Qualifying Facility under PURPA (Public Utility Regulatory Policies Act of 1978) □ Offset load, non-export of power □ Other (describe) 						
7. TYPE OF INTERCONNECTION						
Parallel Operation (operation for more than 100 milliseconds while c	onnected to the distribution system)					
	Momentary parallel operation (less than or equal to 100 millisecond connection), or isolated operation / open transition					
*Per Instructions on page 1, an application is not needed if the connection to the utility system is less than or equal to 100 milliseconds						
8. ELECTRICITY USE, PRODUCTION, AND PURCHASES						
a. Anticipated annual electricity consumption of the facility or site:		kWh/yr				
b. Anticipated annual electricity production of the generation system:		kWh/yr				
c. Anticipated annual electricity purchases from electric utility (a – b):						
* Value will be negative if there are net sales to the Public Utility						
9. PROJECT DESIGN AND ENGINEERING						
COMPANY						
REPRESENTATIVE	TITLE					
EMAIL ADDRESS	PHONE NUMBER					
10. INSTALLING CONTRACTOR INFORMATION (IF KNOWN)	SAME AS PROJECT DESIG	N & ENGINEERING ABOVE				
COMPANY	ELECTRICAL CONTRACTOR'S LICENS	SE NUMBER				
REPRESENTATIVE	TITLE					
EMAIL ADDRESS	PHONE NUMBER					
11. ESTIMATED CONSTRUCTION START DATE	REQUESTED IN-SERVICE DA	ATE				
MONTH DAY YEAR	MONTH	DAY YEAR				

12. LIABILITY INSURANCE			
CARRIER	LIMITS		
AOSNITANANS	JONE WINDED	FMAIL ADDDDGGG	
AGENT NAME PI	HONE NUMBER	EMAIL ADDRESS	
Self-insured (e.g., if a local unit of government)			
Other form of financial responsibility (please des	cribe)		
Note: Applicant must also provide Proof of Insurance	e as an Attachment		
Note: See Minimum Coverage under Wis. Admin. Co. Note: If this is new construction, provide the current "Change of Ownership" Form upon completion of sa	ode PSC <u>119.05-1.</u> owner/builder's insurance informati	on, and have the new home/build	ding purchaser fill out a
Change of Ownership Form upon completion of sa	e.		
13. DESIGN REQUIREMENTS			
a) Has the proposed paralleling equipment (such as	an inverter) been certified by a nati	onally recognized testing	
laboratory (e.g. UL 1741)? b) If certified, list the applicable			∐ Yes
certifications (e.g. UL 1741) c) If not certified, does the proposed distributed gene	prator most the requirements define	nd in Wis Admin Codo chanter	Not Applicable
PSC 119.27?	erator meet the requirements define	ed in Wis. Admin. Code chapter	Yes No
14. REQUIRED ATTACHMENTS			
a) Technology-based attachment(s) and related	ed manufacturer specification data s	heets	
b) One-line Schematic Diagram of the System point of interconnection, meter(s), protection e			disconnect switch (if required),
c) Site plan showing major equipment, electric protection equipment, location of disconnect s	service entrance, electric meter(s)	, location of distributed generatio	n and interface equipment, distributed generation system
d) Proof of Insurance per Section 12			
e) Proof of equipment certification or other cor	npliance with requirements describe	ed in Section 13	
15. APPLICANT AND DESIGNER/ENGINEE	R SIGNATURE		
To the best of my knowledge, all the information pro	vided in this Application Form is co	mplete and correct.	
APPLICANT SIGNATURE (LISTED IN SECTION 1)		DATE	
PROJECT DESIGNER/ENGINEER SIGNATURE		DATE	