

GLACIER ELECTRIC COOPERATIVE

Application for Operation of Customer-Owned Generation

This application should be completed as soon as possible and returned to the Cooperative in order to begin processing the request. See Customer Guidelines for Electric Power Generator Installation and Interconnection for additional information.

INFORMATION: This application is used by the cooperative to determine the required equipment configuration for the customer interface. Every effort should be made to supply as much information as possible.

PART 1 OWNER/APPLICANT INFORMATION

Company: _____
Mailing Address: _____
City: _____ County: _____ State: _____ Zip Code: _____
Phone Number: _____ Representative: _____

PROJECT DESIGN/ENGINEERING (ARCHITECT) (as applicable)

Company: _____
Mailing Address: _____
City: _____ County: _____ State: _____ Zip Code: _____
Phone Number: _____ Representative: _____

ELECTRICAL CONTRACTOR (as applicable)

Company: _____
Mailing Address: _____
City: _____ County: _____ State: _____ Zip Code: _____
Phone Number: _____ Representative: _____

TYPE OF GENERATOR (as applicable)

Photovoltaic	_____	Wind	_____	Microturbine	_____
Diesel Engine	_____	Gas Engine	_____	Turbine	_____
Other	_____				

.....
ESTIMATED LOAD, GENERATOR RATING AND MODE OF OPERATION INFORMATION

The following information will be used to help properly design the Cooperative customer interconnection. This information is not intended as a commitment or contract for billing purposes.

Total Site Load _____ (kW)
Residential _____ Commercial _____ Industrial _____
Generator Rating _____ (kW) Annual Estimated Generation _____
(kWh)

Mode of Operation

Isolated _____ Paralleling _____ Power Export _____

NOTE: For net metering applications, the total generator size may not exceed 10kw total output, and may not be more than 50% of the customer load connected to the meter which will interface with the generator.

.....
DESCRIPTION OF PROPOSED INSTALLATION AND OPERATION

Give a general description of the proposed installation, including a detailed description of its planned location and when you plan to operate the generator. Attach additional pages if necessary.

PART 2

(Complete all applicable items. Copy this page as required for additional generators)

SYNCHRONOUS GENERATOR DATA

Unit Number: _____ Total number of units with listed specifications on site: _____
Manufacturer: _____
Type: _____ Date of manufacture: _____
Serial Number (each): _____
Phases: Single Three R.P.M.: _____ Frequency (Hz): _____
Rated Output (for one unit): _____ Kilowatt _____ Kilovolt-Ampere
Rated Power Factor (%): _____ Rated Voltage (Volts): _____ Rated Amperes: _____
Field Volts: _____ Field Amps: _____ Motoring power (kW): _____
Synchronous Reactance (Xd): _____ % on _____ KVA base
Transient Reactance (X'd): _____ % on _____ KVA base

POWER CIRCUIT BREAKER (if applicable)

Manufacturer: _____ Model: _____
Rated Voltage (kilovolts): _____ Rated ampacity (Amperes) _____
Interrupting rating (Amperes): _____ BIL Rating: _____
Interrupting medium / insulating medium (ex. Vacuum, gas, oil) _____ / _____
Control Voltage (Closing): _____ (Volts) AC DC
Control Voltage (Tripping): _____ (Volts) AC DC Battery Charged Capacitor
Close energy: Spring Motor Hydraulic Pneumatic Other: _____
Trip energy: Spring Motor Hydraulic Pneumatic Other: _____
Bushing Current Transformers: _____ (Max. ratio) Relay Accuracy Class: _____
Multi ratio? No Yes: (Available taps) _____

.....
ADDITIONAL INFORMATION

In addition to the items listed above, please attach a detailed one-line diagram of the proposed facility, all applicable elementary diagrams, major equipment, (generators, transformers, inverters, circuit breakers, protective relays, etc.) specifications, test reports, etc., and any other applicable drawings or documents necessary for the proper design of the interconnection. Also describe the project's planned operating mode (e.g., combined heat and power, peak shaving, etc.), and its address or grid coordinates.

END OF PART 2

SIGN OFF AREA

The customer agrees to provide the Cooperative with any additional information required to complete the interconnection. The customer shall operate his equipment within the guidelines set forth by the cooperative.

Applicant

Date

ELECTRIC COOPERATIVE CONTACT FOR APPLICATION SUBMISSION AND FOR MORE INFORMATION:

Cooperative contact: Jasen R. Bronec
Title: General Manager
Address: 410 East Main
Cut Bank, MT 59427

Phone: (406) 873-5566
Fax: (406) 873-2071
e-mail: jbronec@glacierelectric.com