

**Schedule 1**

**LEVEL 1 INTERCONNECTION REQUEST FORM FOR SMALL GENERATING FACILITY NOT EXCEEDING 500 kW**

PURSUANT TO 20VAC5-314-40 OF THE COMMISSION'S REGULATIONS GOVERNING INTERCONNECTION OF SMALL ELECTRICAL GENERATORS, APPLICANT HEREBY GIVES NOTICE OF INTENT TO OPERATE A GENERATING FACILITY.

**Section 1. Interconnection Customer Information**

Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone Number(s): \_\_\_\_\_  
Fax Number: \_\_\_\_\_ Email: \_\_\_\_\_

Utility: \_\_\_\_\_  
Utility Account Number: \_\_\_\_\_  
Competitive Service Provider: \_\_\_\_\_  
CSP Account Number: \_\_\_\_\_  
Proposed Interconnection Date: \_\_\_\_\_

**Section 2. Processing Fee**

The nonrefundable processing fee payable to the utility is \$100.

**Section 3. Small Generating Facility Information**

SGF owner: \_\_\_\_\_  
SGF operator: \_\_\_\_\_  
Business relationship to applicant: \_\_\_\_\_  
Mailing address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
SGF Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone Number(s): \_\_\_\_\_  
Fax Number: \_\_\_\_\_ Email: \_\_\_\_\_  
Fuel Type: \_\_\_\_\_  
Generator Manufacturer and Model: \_\_\_\_\_  
Rated Capacity in kilowatts: AC: \_\_\_\_\_ DC: \_\_\_\_\_  
Inverter Manufacturer and Model: \_\_\_\_\_  
Battery Backup: Yes \_\_\_\_\_ No \_\_\_\_\_

**Facility schematic and equipment layout must be attached to this form.**

**Section 4. Information for Generators with an AC capacity in excess of 25 kW**

Is the proposed generator inverter based? Yes \_\_\_\_\_ No \_\_\_\_\_  
Generator Type: Inverter \_\_\_\_\_ Induction \_\_\_\_\_ Synchronous \_\_\_\_\_  
Frequency: \_\_\_\_\_ Hz; Number of phases: One \_\_\_\_\_ Three \_\_\_\_\_  
Rated Capacity: DC \_\_\_\_\_ kW; AC apparent \_\_\_\_\_ kVA; AC real \_\_\_\_\_ kW;  
Power factor \_\_\_\_\_ %; AC voltage \_\_\_\_\_; AC amperage \_\_\_\_\_  
Facility schematic and equipment layout must be attached to this form.

**Section 5. Vendor Certification**

The SGF equipment is listed by Underwriters Laboratories to be in compliance with UL1741.  
Signed (Vendor): \_\_\_\_\_ Date: \_\_\_\_\_  
Name (printed): \_\_\_\_\_  
Company: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_

**Section 6. Electrician Certification**

The generator equipment has been installed in accordance with the manufacturer's specifications as well as all applicable provisions of the National Electrical Code.  
Signed (Licensed Electrician): \_\_\_\_\_ Date: \_\_\_\_\_  
Name (printed): \_\_\_\_\_  
License Number: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_

**Section 7. Applicant Signature**

I hereby certify that, to the best of my knowledge, all of the information provided in this Request Form is true and correct.  
Signature of Applicant: \_\_\_\_\_  
Date: \_\_\_\_\_

**Section 8. Utility Acknowledgement of Receipt**

Signed: \_\_\_\_\_  
Title: \_\_\_\_\_  
Utility: \_\_\_\_\_  
Date: \_\_\_\_\_

Utility signature signifies only receipt of this form, in compliance with 20VAC5-314-40, the State Corporation Commission's Regulations Governing Interconnection of Small Electrical Generators.