



## Level 2, 3 and 4 Interconnection Application for Certified, Inverter-Based Generating Facilities 25KW and Greater

The Customer-Generator applicant ("Applicant") hereby makes application to the T & D Utility to install and operate a generating facility interconnected with the transmission and distribution utility system. This application will be considered as an application for interconnection of generators under Expedited interconnection review provided the generator is not greater than 10MW but shall serve as an Application for Standard interconnection review if greater than 10 MW or if Expedited review does not qualify the generator for interconnection.

An application is a Complete Application when it provides all applicable information required below. (Additional information to evaluate a request for interconnection may be required and will be so requested from the Interconnection Applicant by Utility after the application is deemed complete).

Once complete, please sign and include your (\$) \_\_\_\_\_ application fee and mail to the following address applicable for your service territory:

**Versant Distributed Generation**  
**PO BOX 16005, LEWISTON ME 04243-9582**  
**Or Email at: dginterconnections@versantpower.com**

Ensure file name and subject line are identified as per format below:  
**Developer Name - City - mm/dd/yyyy - Document Type**

*Example Document Types for filename*  
 - Application  
 - One Line Drawing  
 - Schematic Drawings  
 - Site Documentation  
 - Site Control

**(Make check payable to: Versant Power or Contact for Funds Transfer Instructions)**

1. Project Name or Legal Name of Interconnecting Applicant (or, if an Individual /Individual's Name)			
Name		Contact Person	
Company Name		Account Number <i>(Existing Account Number, if generator to be interconnected on the Customer side of a utility revenue meter.)</i>	
Proposed generation facility address			
City, State, ZIP		Telephone (Day)	
Email Address <i>(Please use email that is intended for use throughout the process)</i>		Telephone (Evening)	
<b>Interconnect Service Type (Must Choose One)      Note* Review recent NEB qualifications and changes when making this selection</b>			
<input type="checkbox"/> Network Resource <input type="checkbox"/> Energy Only (Settlement Only) <input type="checkbox"/> Load Response (no export) <input type="checkbox"/> Net metering (NEB) <input type="checkbox"/> Procurement			
2. Contact (if different from Interconnection Customer)			
Name		Contact Person	
Account Number		Owner of the facility <i>(include percent ownership by any electric utility)</i>	
Address		Telephone (Day)	
City, State, ZIP		Telephone (Evening)	
Email Address		Fax	
3. Installing Electrical Contractor Information			
Company		Representative	
Title		Fax	
Address		Telephone (Day)	
City, State, ZIP		Email Address	



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<b>4. Timing</b>							
Requested In-Service Date							
<b>5. Generating Qualifications</b>							
Inverter Manufacturer			Model Name/ Version No.				
PS-CAD Version No.			Serial No. and Quantity				
PS-CAD Model attached <i>Applicable for Level 4 only</i>		<input type="checkbox"/> Yes <input type="checkbox"/> No (if <b>NO</b> is selected, please request manufacturer to provide ASAP)					
Nameplate Output Power Rating <i>(in KW or KVA)</i>		Summer		_____ kW	_____ kVA		
		Winter		_____ kW	_____ kVA		
Individual Generator Power Factor		Rated Power Factor		_____ Leading	_____ Lagging		
Generating Facility/Inverter AC output voltage				_____ Volts			
Generating Facility Type							
Phase		<input type="checkbox"/> Single Phase <input type="checkbox"/> Three Phase					
Facility Type		<input type="checkbox"/> Synchronous <input type="checkbox"/> Induction <input type="checkbox"/> Inverter <input type="checkbox"/> Other					
Total Number of Generators in wind farm (if applicable) to be interconnected pursuant to this Interconnection							
Request	_____	Elevation	_____	Single Phase	_____	Three Phase	_____
Please provide <b>Battery INVERTER</b> details, if different							
Manufacturer		_____		Model	_____		PS-CAD Version No
_____							
Battery Storage Details (if applicable)							
Battery Storage rating (if applicable)		_____ kW and _____ AH or KWH			BESS charge type		<input type="checkbox"/> Grid/Utility <input type="checkbox"/> PV
Describe operating mode on the one-line diagram (attach with the application) <i>A short explanation on how BESS will be operated, such as ISO or utility controlled, frequency or voltage support, etc.</i>							
List of adjustable set points for the protective equipment or software							
Rated system current		_____ (amps)					
Generating facility Location <i>(Road Name, Town, and Digital GPS Coordinates or Pole No)</i>							
Interconnection Customer or Customer-Site Load		_____ kW , if none, explain _____					
Typical Reactive Load (if known)							
Maximum Physical Export Capability Requested:		_____ kW					
Prime Mover: Photovoltaic/Reciprocating Engine/Fuel Cell/Turbine/Other (describe)							
Energy Source: Photovoltaic/Wind/Hydro/Diesel/							



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Natural Gas/Fuel Oil/Reciprocating Engine Other (describe)			
Is the equipment UL1741-SB Listed? <i>If YES, attach any documentation provided by the generator manufacturer describing the SB listing for the generating facility to this application.</i>			<input type="checkbox"/> Yes <input type="checkbox"/> No
Is the equipment <b>1547-2018</b> Compliant? <i>If YES, attach any documentation provided by the generator manufacturer describing the 1547-2018 listing for the generating facility to this application.</i>			<input type="checkbox"/> Yes <input type="checkbox"/> No
List components of the Small Generating Facility Equipment Package that are currently certified:			
<b>Equipment Type (Major equipment) and Qty</b>	<b>Certifying Entity (UL, IEEE etc)</b>		
Is the prime mover compatible with the certified protective relay package? <i>Note: A completed Power Systems Load Flow data sheet must be supplied with the Interconnection Application</i>			<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>6. Small Generating Facility Characteristic Data (for inverter-based machines)</b>			
Max design fault current % of rated current/total amps		Instantaneous or RMS?	<input type="checkbox"/> Instantaneous <input type="checkbox"/> RMS
Harmonics Characteristics: <i>(Maximum THD - Total harmonic distortion)</i>			
Start-up requirements:			
<b>7. Small Generating Facility Characteristic Data (for rotating machines)</b>			
RPM Frequency		(*) Neutral Grounding Resistor (If Applicable):	
<b>8. Synchronous Generators</b>			
Direct Axis Synchronous Reactance, X'd:	_____ P.U.	KVA Base	
Direct Axis Transient Reactance, X'd	_____ P.U.	Field Amperes	
Direct Axis Sub-Transient Reactance, X'd	_____ P.U.	Field Volts	
Negative Sequence Reactance, X2	_____ P.U.		
Zero Sequence Reactance, X0	_____ P.U.		
<b>9. Induction Generators</b>			
Motoring Power (kW)		Stator Resistance, Rs	
I 2t or K (Heating Time Constant)		Stator Reactance, Xs	
Rotor Resistance, Rr		Magnetizing Reactance, Xm	
Rotor Reactance, Xr		Short Circuit Reactance, Xd"	
Exciting Current		Temperature Rise	
Frame Size		Design Letter	
Reactive Power Required In Vars (No Load)		Reactive Power Required In Vars (Full Load):	_____
Total Rotating Inertia	H: _____ Per Unit on kVA Base		



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*Note: Please contact the T & D Utility prior to submitting this Interconnection Application to determine if the specified information in Section 9 above is required.*

### 10. Excitation and Governor System Data for Synchronous Generators Only Induction Generators

*Provide appropriate IEEE model block diagram of excitation system, governor system and power system stabilizer (PSS) in accordance with the regional reliability council criteria. A PSS may be determined to be required by applicable studies. A copy of the manufacturer's block diagram may not be substituted.*

### 11. Interconnection Facilities Information

*Transformer Data (If Applicable, for Interconnection Customer- Owned Transformer):*

Will a transformer be used between the generator and the Point of Interconnection?				<input type="checkbox"/> Yes	<input type="checkbox"/> No
Will the transformer be provided by the Interconnection Customer?				<input type="checkbox"/> Yes	<input type="checkbox"/> No
Transformer Phasing and size	<input type="checkbox"/> Single phase <input type="checkbox"/> Three phase		_____ kVA (Size)		
Transformer Impedance	_____ percent on _____ kVA Base				
If Transformer is three Phase, please provide following details					
	Transformer Primary	Transformer Secondary	Transformer Tertiary		
Volts					
Delta					
Wye					
Wye Grounded					
Transformer Fuse Data <i>- If Applicable, for Interconnection Customer-Owned Fuse)</i> <i>- Attach copy of fuse manufacturer's Minimum Melt and Total Clearing Time-Current Curves)</i>					
Manufacturer		Type			
Size		Speed			
Interconnecting Circuit Breaker or Reclosure (if applicable):					
Manufacturer		Type			
Load Rating (Amps):		Interrupting Rating (Amps):		Trip Speed (Cycles)	
Interconnection Protective Relays If applicable):		Microprocessor Manufacturer & Model			
If Microprocessor-Controlled, please provide following information List of Functions and Adjustable Setpoints for the protective equipment or software					
	Set-Point Function	Minimum	Maximum		
1					
2					
3					
4					
5					
6					
If Discrete Components: (Enclose Copy of any Proposed Time-Overcurrent Coordination Curves)					
Manufacturer	Type:	Style/Catalog No	Proposed Setting		



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<b>Current Transformer Data (If Applicable):</b> Enclose copy of Manufacturer Excitation and Ratio Correction Curves)			
Manufacturer	Type:	Accuracy Class	Proposed Ratio Connection
<b>Potential Transformer Data (If Applicable):</b>			
Manufacturer	Type:	Accuracy Class	Proposed Ratio Connection
<b>General Information Checklist</b>			
<i>Please select check box under "Reviewed Column" for each item listed below verifying that a complete package has been submitted and the Customer(s) are aware of all requirements</i>			
<b>Checklist</b>			<b>Yes / No</b>
Enclose a copy of site electrical one-line diagram showing the configuration of all Small Generating Facility equipment, including conductor type, impedances, length between devices from the PCC to the inverter, current, potential circuits, and protection & control schemes. If the Small Generating Facility is larger than 50 kW, the one-line diagram must be signed and stamped by a licensed Professional Engineer.			<input type="checkbox"/> Yes <input type="checkbox"/> No
Is a One-Line Diagram Enclosed?			
Enclose a copy of any documentation that indicates the precise physical location of the proposed Small Generating Facility. Including device layout that corresponds with single line diagram (e.g., USGS topographic map or other diagram or documentation).			<input type="checkbox"/> Yes <input type="checkbox"/> No
Proposed location of interface equipment and interconnection is shown on the site plan <i>including address</i>			<input type="checkbox"/> Yes <input type="checkbox"/> No
Enclose a copy of any documentation that describes and details the operation of the protection and control schemes.			<input type="checkbox"/> Yes <input type="checkbox"/> No
Site Control (Please attach if applicable)			<input type="checkbox"/> Yes <input type="checkbox"/> No
Enclose copies of schematic drawings for all protection and control circuits, relay current circuits, relay potential circuits, and alarm/monitoring circuits (if applicable)			<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Information Required Prior to Physical Interconnection</b>			
Installing Electrician			
Firm			
License No.			
Mailing Address			City
State		Zip Code	Telephone
<b>Applicant's Signature</b>			
I hereby certify that, to the best of my knowledge, all the information provided in the Interconnection Application is true and correct. I also agree to install a Warning Label provided by (utility) on or near my service meter location. Generating systems must be compliant with IEEE, NEC, ANSI, and UL standards, where applicable. By signing below, the Applicant also certifies that the installed generating equipment meets the appropriate preceding requirement(s) and can supply documentation that confirms compliance.			
Signed			Date