



Application for Interconnection of Distributed Generation Facility

The following application must be completed in its entirety and returned to Elberton Utilities Electric Division at least 30 days prior to the anticipated interconnection date so that the City will have ample time to process the request. In addition, applicable permits must be obtained from the City of Elberton Building Inspector prior to the installation of any distributed generation and associated equipment. The undersigned herewith applies for metering and interconnection services required for the distributed generation project described below.

Application Fee:

Generators rated at 10 kW or less	\$50 (Non-refundable)
Generators rated at greater than 10 kW	Based on engineering estimate

APPLICANT CONTACT INFORMATION

Name: _____
(Same Name as shown for the City Electric Account Billing)

Electric Service Address: _____

Customer Account #: _____

Contact Person (if different than above): _____

E-mail Address: _____

Phone#: _____

CONSULTING ENGINEER OR CONTRACTOR/INSTALLER INFORMATION

Company Name: _____

Name: _____

Address: _____

E-mail Address: _____

Phone#: _____

GENERATING FACILITY/INVERTER INFORMATION

Generator Type: (circle one) Photovoltaic Wind Fuel Cell Hydro Other

Manufacturer: _____

Model Name and Number: _____

kW Rating: _____ kVA Rating: _____

Interconnection Voltage: _____

Will you supply the necessary var requirements? (Circle one) Yes No

Disconnect Switch Manufacturer/Model Number: _____

Disconnect Switch Rating: _____ THD: _____

Maximum Fault Current: _____

External Disconnect: (circle one) Yes No

If yes, location: _____

Will the system export power? (Circle one) Yes No

Rated Frequency: _____

ONE-LINE DIAGRAM AND ADDITIONAL INFORMATION

One-Line Diagram Attached: (circle one) Yes No

Product Literature Attached: (circle one) Yes No

Obtained Electrical Permit: (circle one) Yes No

EXISTING ELECTRIC SERVICE

Main Panel Ampere Rating: _____

Main Panel Voltage Rating: _____

Service Character (circle one): Single phase Three phase

DISTRIBUTED GENERATION INSTALLATION INFORMATION

Is the normal operation of this generator intended to provide power to meet base load requirements, demand management, standby power, back-up power, or other? (Please describe):

Estimated In-Service Date: _____

Estimated Interconnection Date: _____

By completing and submitting this Application, Applicant agrees to all service rules, regulations, terms, policies and procedures, as amended from time to time, which are incorporated herein by this reference.

Printed Name of Applicant:

Signature: _____ **Date** _____

Contact information for Elberton Utilities Electric Division:

Brad Alexander, Director of Operations
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P. O. Box 70
Elberton, GA 30635-0070

Phone: 706-213-3168
Email: balexander@cityofelberton.net

Customer Service: 706-213-3278

Application accepted for review: (circle one) Yes No If no, why:
