## **Appendix A1**



## FORM DG01

## Application Form to connect 10 kW or less of Micro- Generation to Kitchener-Wilmot Hydro Inc.'s Electrical Distribution System

<ol> <li>Applicant's Cor facility)</li> </ol>	ntact Inform	nation (the party	y that will be con	ntractually obligated f	for this generating
Legal Name					
Company (if any)					
Mailing Address					
Phone Number (Main)		Ext.	Cell		
Fax Number			E-Ma	nil	
2. Location of the	Generation	ո Facility			
Street Address					
Lot					
Concession					
County Kitchener-Wilmot Hydro Account Number (if any)					
3. Applicant's Ow  ☐ Owner [	nership Into	erest in the Ge	eneration Sys	tem	
4. Primary Intent	of the Gene	eration System	n		
On-site Use of Pow	_	Metering			
MicroFIT Program,	Registration ,	#			
Conditional Offer r	eceived from Inde	pendent Electricity S	System Operator?	Yes No	
	•	program, the connect. Program from IESO ar	•	e processed unless the app Registration #.	licant receives the
Other (please ide	entify)				
5. Electricity Use,	Production	and Purchase	es		
(A) Anticipated annua	al electricity cons	umption of the facili	ty or site		
(B) Anticipated annua	al plactricity prod	uction of the gapers	tion system -	kWh/yr	
(b) Anticipated annua	ii electricity prod	action of the genera	-	kWh/yr	
(C) Anticipated annua	ıl electricity expo	orts [i.e. (A) minus (B)]	] -	kWh/yr 	

Value will be negative if there are no net sales to the distribution system.

## 6. Installing Contractor Information **Contractor Name Mailing Address** Name of Contractor Contact Phone Number (Main) Ext. Cell Fax Number E-Mail 7. Requested In-Service Date Date Provide One-Line Schematic Diagram of the System; for existing load customer, the existing demarcation point and revenue meter should be included. ☐ Schematic is Attached **Number of Pages** 8. Generator Information **Proposed Generation Facility Description** Proposed Total Generation Capacity to be installed kW Proposed Total Inverter Nameplate Capacity if Applicable kW **Proposed Generator Unit Nameplate Capacity** Manufacturer Model No. Generator Type: Single-Phase Three-Phase Synchronous Induction Inverter Other **Primary Energy Source:** Renewable: Type: Non Renewable: Type: Note: If there is more than one generator and/or inverter, attach an additional sheet describing each. If Incremental Project - Existing Generating Facility Description **Existing Generator Nameplate Capacity** kW Existing Inverter Nameplate Capacity if Applicable kW Manufacturer Model No. **Generator Type:** Single-Phase Three-Phase Synchronous Induction Inverter Other Primary Intent of the Existing Generation Facility On-site Use of Power □ Net Metering Page 2 of 3 Standard Offer Program Other (please identify)

		mary Energy Source: newable:	Type:					
	No	on Renewable:	Type:					
	NC	OTE: The combination of	 f the proposed and the e	xisting generation facility	y cannot exceed 10 kW.			
9.		te Plan Showing Loca needed)	ation of the External	Disconnect Switch (at	tach additional sheets			
		Site Plan is Attached						
10.	Design Requirements							
	a)	Has the proposed generator a	and inverter been CSA or ESA co	ertified?				
		☐ Yes ☐ No						
	b)	If your answer is yes, please furecommended you contact the		cifications). If your answer is no, it is status.				
		☐ Manufacturer's specificati	ons are attached					
-	Sta	itus of certification and compila	ince with operating limits whei	e answer to 10(a) and/or (b) is n	o.			
11.	Ot	ther Comments, Spec	:ifications and Excep	tions (attach addition	al sheets if needed)			
- 12.	Δı	pplicant and Installer	r Signature					
14.	_	· <del>-</del>	_	ided in this Application Fo	rm is complete and correct.			
		-	·		-			
		Applicant Signatu	re	Date				
		Installer's Signatu	 re	Date				

Return this form to: Kitchener-Wilmot Hydro Inc., 301 Victoria Street South, Kitchener, ON N2G 4L2. Attn: John Theriault, Service Design Supervisor

E-Mail: jtheriault@kwhydro.ca Phone: (519) 745-4771 ext. 6240