

Form DG01 – Application Form to Connect 10kW or less of Micro-Generation to the former Kitchener-Wilmot Hydro Inc.'s Electrical Distribution System

1. Applicant's Contact Information: (The party that will be contractually obligated for this generating facility)

Lega	al Name:				
Con	npany (if any):				
Mail	ing Address:				
Pho	ne Number: Maiı	າ	Cell:		
Fax	Number:			Email:	_
	2. Location of the	the Generation Fa	cility		
Lot:					
Con	cession:				
Cou					
Kitcl	nener-Wilmot Hy	dro Account Numb	er (if any): _		
;	B. Applicant's	Ownership Interes	st in the Gen	eration System	
(Owner	Co-Owner	Lease	Other	
4	1. Primary Inte	nt of the Generati	on System		
(On-site use of po	ower Ne	et Metering		
ľ	Microfit Program	Registration	on Number: _		
(Conditional offer No	received from the I	ndependent	Electricity System Operator?	Yes
ι	• •	ant receives the Co	. •	connection request cannot be pa er of MicroFIT Program from IES	
(Other (Please sp	ecify:			



	Electricity Use, Production and Purchases					
B)	B) Anticipated annual electricity production of the generating system kWh/ye					kWh/year kWh/year kWh/year
6.	Installing Contrac	ctor Information				
Contra	ctor Name:					
Mailing	Address:					
Name	of Contractor Conta	nct:				
Phone	Number: Main:			Cell:		
Fax Nu	ımber:				Email:	
7.	Requested In-Ser	vice Date				
Date: _						
	cation point and rev Schematic is attacl Generator Inform	hed Numb	per of pa			
	sed Generation Fac					
-						kW
Proposed Total Inverter Newsplate Conseilte (if and				ailahla)		kW
Proposed Total Inverter Nameplate Capacity (if ava Proposed Generator Unit Nameplate Capacity			allable)			
•		маттеріате Сара	icity			kW
	acturer:			Model I	No:	
Genera	ator Type:					
	Single-Phase Inverter	Three-Phase Other (Specif		Synchronous		duction
Primar	y Energy Source:					
Renew	able:		Туре:			
Non-Re	enewable:		Type:			
Note: I	f there is more than	one generator a	ınd/or inv	/erter, attach an	additiona	ıl sheet describiı



If Inc	remental Project – I	Existing Genera	ating Fa	cility Description		
Existing Generator Nameplate Capacity: Existing Inverter Nameplate Capacity (if applicable):						kW
						kW
Manu	facturer:			Model No:		
Gene	rator Type:					
	Single-Phase Inverter	Three-Phase Other (Speci		Synchronous	Induction	
Prima	ry Intent of the Exist	ing Generation F	acility			
	On-site use of power		Net M	etering		
Standard Offer Program			Other	(Please specify):		
Prima	ry Energy Source					
Rene	wable:		Type:			
Non-F	Renewable:		Туре:			
kW.	E: The combination of Site Plan Showing sheets as needed	g Location of th				
Si	te plan is attached					
10	10. Design Requirements					
,	Has the proposed generator been CSA or ESA Certified? Yes No If your answer is yes, please furnish details (e.g. copies of manufacturer's specifications). If your answer is no, it is recommended you contact the equipment manufacturer and determine the status.					
	Manufactur	er's specificatior	ns are at	tached		
11	. Other Comments needed)	Specifications	and Ex	ceptions (attach a	dditional sheet	s if



12. Applicant and Installer Signature

Phone: (519) 745-4771 ext. 6240

To the best of my knowledge, all the information	on in the application form is complete and correct
Applicant Signature:	Date:
Installer Signature:	Date:
Return this form to: Enova Power Corp., 301 V Attn: John Theriault, Service Design Superviso	·
E-Mail: john.theriault@enovapower.com	