APPLICATION TO INTERCONNECT SMALL
GENERATION 100 kW OR LESS

Member hereby gives notice of intent to operate an interconnected generating facility pursuant to the “Standard for Interconnecting Small Generation 100 kW or less with Electric Power Systems (Interconnection Standard)”. Permission to interconnect is not granted until an Interconnection Agreement has been completed between the Cooperative and the Member.

All applications must be fully complete before they will be accepted or approved by EnergyUnited. A completed application consists of the following:

___ This “Application to Interconnect”
___ The Application Fee of $100 for Residential members and $250 for Commercial members
___ A one-line diagram of the system showing the main components and metering of the system
___ Manufacturer’s catalog or cut-sheet for the inverter showing pertinent specifications and certifications
___ Proof of Insurance (Liability coverage of $100,000 for residential members and $300,000 for commercial members)
___ Copy of the Report of Proposed Construction sent to the NC Utilities Commission

Please submit application and all required materials (Checks payable to EnergyUnited) to:

EnergyUnited, PO Box 1831, Statesville, NC  28687

TYPE OF INTERCONNECTION

Net Metering _____  Residential PPS _____  Commercial PPS _____  Own-Use _______

(NOTE: Own-Use installations are connected the same as Net Metering installations but receive no credit for excess energy produced and carry no additional fees.)

MEMBER/OWNER INFORMATION

Member Name: ________________________________________________________________
EU Account #: ______________________________________________________________
Mailing Address: _____________________________________________________________
City: _______________________________ State: __________ Zip Code: ______________
Phone Number: __________________________ Fax Number: _________________________
Email Address: ______________________________________________________________

FOR ENERGYUNITED USE ONLY

Application Completed On: __________________ Application No.: __________________
Reviewed By: ___________________________ Date: _____________________________

APPROVED ________  NOT APPROVED ________

If Not Approved, list reason: _______________________________
APPLICATION TO INTERCONNECT SMALL GENERATION 100 kW OR LESS

PROJECT DEVELOPER/ENGINEER
Name: __________________________________________________________
Company: ____________________________________________________________________________________
Mailing Address: ____________________________________________________________
City: __________________________ State: __________ Zip Code: ___________________
Phone Number: __________________ Fax Number: ______________________________
Email Address: ________________________________________________________________________________________

ELECTRICAL CONTRACTOR (as applicable)
Name: __________________________________________________________
Company: ____________________________________________________________________________________
Mailing Address: ____________________________________________________________
City: __________________________ State: __________ Zip Code: ___________________
Phone Number: __________________ Fax Number: ______________________________
Email Address: ________________________________________________________________________________________

ELECTRICAL INSPECTOR
Name: __________________________________ County: __________________________ Phone: __________________________

Generator and Facility Information

FACILITY LOCATION: ____________________________________________________________________________________

TYPE OF GENERATOR (as applicable)
Photovoltaic ________ Wind ________ Microturbine ________
Diesel Engine ________ Gas Engine ________ Combustion Turbine ________
Other ________________________________________________________

ESTIMATED LOAD, GENERATOR RATING AND MODE OF OPERATION INFORMATION
The following information is necessary to help properly design the Cooperative customer interconnection. This information is not intended as a commitment or contract for billing purposes.
Total Site Load ________ (kW) (For Commercial members)
Residential ________ Commercial ________ Industrial ________
Generator Rating ________ (kW) Annual Estimated Generation ________ (kWh)
Mode of Operation

Power Export _________ Net Metering _________ Standby/Battery Backup_________

Is this an existing interconnected generator? Yes ___________ No ___________

--- Generator / Inverter ---

<table>
<thead>
<tr>
<th>Generator / Inverter</th>
<th># 1</th>
<th># 2</th>
<th># 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Energy Source / Type</td>
<td>________________</td>
<td>________________</td>
<td>________________</td>
</tr>
<tr>
<td>Manufacturer Name</td>
<td>________________</td>
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<tr>
<td>Model Name &amp; # (Specific)</td>
<td>________________</td>
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<tr>
<td>Nameplate Rating (kW AC)</td>
<td>________________</td>
<td>________________</td>
<td>________________</td>
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<tr>
<td>Nominal Voltage (Volts AC)</td>
<td>________________</td>
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<td>________________</td>
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(Note: If more than 3 Generators / Inverters will be used, complete a separate attachment with the information above)

If a customer owned transformer will be used, attach the transformer manufacturer’s specifications to this application.

Proposed Installation Date: __________________________
Proposed Interconnection Date: _______________________

Certification

The interconnection protection system is tested and listed for compliance with the latest published edition of Underwriters Laboratories (UL) 1741 including the anti-islanding test. The system (is / will) be installed in compliance with IEEE 1547 as applicable, all manufacturer specifications, the National Electric Code and all local codes. No protection settings affecting anti-islanding have been or will be adjusted or modified.

I hereby certify that, to the best of my knowledge, all of the information provided in this Application is true and correct and the generator will comply with the Interconnection Standard stated above. I also agree to supply the Cooperative with any additional information that may be needed to complete the Interconnection process.

Signature of Member/Owner ________________________________

Date: _______________________

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