

HALTON HILLS HYDRO INC.
Generator Connection Assessment Review Form
10 kW or less



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

Name _____
Company (if any) _____
Mailing Address _____
Phone Number (Main) _____ Cell _____
Fax Number _____ Email _____

2. Location of the Generation System

Street Address _____
Lot _____
Concession _____
County _____
Hydro Account Number (if any) _____

3. Applicant's Ownership Interest in the Generation System

Owner Co-owner Lease Other

4. Primary Intent of the Generation System

On-site Use of Power Net Metering Commercial power sales to a third party
 Participate in OPA or other government incentive program

5. Electricity Use, production and Purchases

(A) Anticipated annual electricity consumption of the facility or site _____ kWh/yr
(B) Anticipated annual electricity production of the generation system. _____ kWh/yr
(C) Anticipated annual electricity exports (i.e. (B) minus (A)) _____ 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) _____ Cell _____
Fax Number _____ Email _____

7. Requested In-Service Date _____

8. Provide One-Line Schematic Diagram of the System:

Schematic is attached

Number of Pages _____

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9. Generator Information (complete for each generator)

Manufacturer _____ Model No. _____

Version No. _____ Serial No. _____

Generation Type:

Single Phase Three Phase Synchronous Induction Inverter Other: _____

Primary Energy Source:

Renewable: _____ Type: _____

Eligible for microFIT contract? Yes No OPA microFIT Contract No.: _____

Non-Renewable _____ Type _____

NOTE: If there is more than one generator and/or inverter, attach an additional sheet describing each.

10. Site Plan Showing Location of the External Disconnect Switch (attach additional sheets as needed)

11. Metering Configuration and Connection

Parallel Series Direct

12. Liability Insurance

Carrier _____ Limits _____

Agent Name _____ Phone Number _____

The Applicant, (Site Owner or Operator, both if different) shall provide a Certificate of Insurance, demonstrating that this liability insurance is in place.

13. Design Requirements

a) Has the proposed distribution generation paralleling equipment been certified?

Yes No

b) If not certified, does the proposed distributed generator meet the operating limits defined in Halton Hills Hydro's DG Technical Specifications?

Yes No

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For items 13(a) and 13(b), 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.

Status of certification and compliance with operating limits where answer to 13 (a) and/or (b) is no.

14. Other Comments, Specifications and Exceptions (attach additional sheets if needed)

15. Applicant and Installer Signature

To the best of my knowledge, all the information provided in this Application Form is complete and correct.

Applicant Signature

Date (yyyy/mm/dd)

Installer

Date (yyyy/mm/dd)

16. Release of Personal Project Related Information (check applicable)

- I hereby grant Halton Hills Hydro Inc. permission to correspond with, meet, and release project related information to the installer of my project.
- I hereby request that once prepared, Halton Hills Hydro Inc. sends the Connection Cost Agreement, Offer to Connect, and Connection Agreement to my installer rather than myself.

Applicant Signature

Date (yyyy/mm/dd)

Please complete and return this form to Halton Hills Hydro Inc., Engineering Department.