

KNOLLWOOD ENERGY

NHPUC 29SEP14AM9:35

Knollwood Energy of MA LLC  
P.O. Box 30  
Chester, New Jersey 07930

September 23, 2014

Debra A. Howland  
Executive Director  
New Hampshire Public Utilities Commission  
21 South Fruit Street, Suite 10  
Concord, NH 03301-2429

Dear Ms Howland,

Enclosed please find the application for the Roger Welch system to be part of the Knollwood Energy of MA LLC (NH-II-13-089) Class II Photovoltaic aggregation for New Hampshire Renewable Energy Certificates (RECs) generated from customer-sited sources, pursuant to New Hampshire Code of Administrative Rules Puc 2506.

Customer and Facility Information

Roger Welch  
66 Dunbar Rd  
Weare, NH 03281  
603- 529-0054  
ramwelch@mygsc.com

The Nepool GIS ID # for this facility is: NON43091. Also enclosed are the Simplified Process Interconnection Application and Service Agreement and the Certificate of Completion for Simplified Process Interconnections. An electronic version has been sent to [executive.director@puc.nh.gov](mailto:executive.director@puc.nh.gov).

Please do not hesitate to contact me if you have any questions regarding this application.

Thank you for your consideration,

**Alane Lakritz**

Alane Lakritz  
President  
**Knollwood Energy of MA LLC**  
862-432-0259  
908-955-0593 (fax)  
[Alane@KnollwoodEnergy.com](mailto:Alane@KnollwoodEnergy.com)

Enclosures (3)



State of New Hampshire  
Public Utilities Commission

21 S. Fruit Street, Suite 10, Concord, NH 03301-2429



**DRAFT APPLICATION FORM FOR**

**RENEWABLE ENERGY CERTIFICATE (REC) ELIGIBILITY FOR CLASS I AND CLASS II  
SOURCES WITH A CAPACITY OF 100 KILOWATTS OR LESS**

Pursuant to New Hampshire Administrative Code Puc 2500 Rules including Puc 2505.08, Certification of Certain Customer-Sited Sources

- Please submit one (1) original and two (2) paper copies of the completed application and cover letter\* to: **Debra A. Howland, Executive Director, New Hampshire Public Utilities Commission**  
21 South Fruit Street, Suite 10, Concord, NH 03301-2429
- Send an electronic version of the completed application and the cover letter electronically to [executive.director@puc.nh.gov](mailto:executive.director@puc.nh.gov).
- The cover letter must include complete contact information and identify the renewable energy class for which the applicant seeks eligibility. Pursuant to Puc 2505.01, the Commission is required to render a decision on an application within 45 days of receiving a completed application.

If you have any questions please contact Barbara Bernstein at (603) 271-6011 or [Barbara.Bernstein@puc.nh.gov](mailto:Barbara.Bernstein@puc.nh.gov).

Photovoltaic (PV) solar facilities are Class II resources. Contact [Barbara.Bernstein@puc.nh.gov](mailto:Barbara.Bernstein@puc.nh.gov) for assistance.

Eligibility Requested for: Class I      Class II       Check here X if this facility part of an aggregation.  
If the facility is part of an aggregation, please list the aggregator's name. Knollwood Energy of MA

Provide the following information for the owner of the PV system.

Applicant Name Roger Welch      Email ramwelch@mygsc.com  
Address 66 Dunbar Rd      City Weare      State NH      Zip 03281  
Telephone 603- 529-0054      Cell 03281

For business applicants, provide the facility name and contact information (if different than applicant contact information).

Facility Name \_\_\_\_\_ Primary Contact Roger Welch  
Address 66 Dunbar Rd      City Weare      State NH      Zip 03281  
Telephone \_\_\_\_\_ Cell \_\_\_\_\_

Email address: \_\_\_\_\_

Provide a complete list of the equipment used at the facility, including the revenue grade REC meter, and, if applicable, the inverter. Your facility will not qualify for RECs without a REC meter.

equipment	quantity	Type	equipment	quantity	Type
PV panels	28	SunEdison F265	other		
Inverter	28	Enphase m250	other		
meter	1	AEE Solar CL200 204V 3W	other		

A copy of the interconnection agreement and the approval to operate your PV system from your electric utility must be included with your application.

For PSNH customers, both the Simplified Process Interconnection Application and Exhibit B - Certificate of Completion are required.

What is the nameplate capacity of your facility (found on your interconnection agreement)? 7.40

What was the initial date of operation (the date your utility approved the facility)? 8/22/2014

Provide the name, license number and contact information of the installer, or indicate that the equipment was installed directly by the customer.

Installer Name SunRay Solar, LLC Contact Michael Fay License # (if applicable) \_\_\_\_\_  
Address 249 Loudon Rd City Concord State: NH Zip 03301  
Telephone (603) 225-6001 email michael@spreadthesunshine.com

If the equipment was installed directly by the customer, please check here:

Provide the name and contact information of the equipment vendor.

Check here if the installer provided the equipment and proceed to the next question.

Business Name \_\_\_\_\_ Contact \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ email \_\_\_\_\_

If an independent electrician was used, please provide the following information.

Electrician's Name Shawn Marvel License # 13363 M

Business Name SunRay Solar, LLC Email marvel@inbx.com

Address 79 Fish Hatchery Rd City Richmond State NH Zip 03470

Provide the name of the independent monitor for this facility. (A list of approved independent monitors is available at [http://www.puc.nh.gov/Sustainable%20Energy/Renewable\\_Energy\\_Source\\_Eligibility.htm](http://www.puc.nh.gov/Sustainable%20Energy/Renewable_Energy_Source_Eligibility.htm).)

Independent Monitor's Name Thomas Kelly Natural Capital, LLC

Is the facility certified under another state's renewable portfolio standard?      yes      nox

If "yes", then provide proof of the certification as **Attachment C**.

- Please note, if your facility is part of an aggregation, your aggregator should provide you with the following information.
- In order to qualify your facility's electrical production for Renewable Energy Certificates (RECs), you must register with the NEPOOL – GIS. Contact information for the GIS administrator follows:

**James Webb**  
**Registry Administrator, APX Environmental Markets**  
224 Airport Parkway, Suite 600, San Jose, CA 95110  
Office: 408.517.2174      [jwebb@apx.com](mailto:jwebb@apx.com)

If you are not part of an aggregation, Mr. Webb will assist you in obtaining a GIS facility code.

GIS Facility Code # NON43091

Asset ID # NON43091

Complete an affidavit by the applicant or qualified installer that the project is installed and operating in conformance with any applicable state/local building codes. Use either the following affidavit form or provide a separate document.

The Commission requires a notarized affidavit as part of the application.

**AFFIDAVIT**

The Undersigned applicant declares under penalty of perjury that the project is installed and operating in conformance with all applicable building codes.

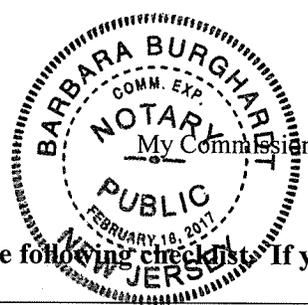
Applicant's Signature Alane Lakritz Date 9/24/14

Applicant's Printed Name Alane Lakritz

Subscribed and sworn before me this 24 Day of September (month) in the year 2014

County of Morris State of New Jersey

Barbara Burghart  
Notary Public/Justice of the Peace



My Commission Expires 2/16/17

Complete the following checklist. If you have questions, contact [barbara.bernstein@puc.nh.gov](mailto:barbara.bernstein@puc.nh.gov).

CHECK LIST: The following has been included to complete the application:	YES
• All contact information has been provided.	X
• A copy of the interconnection agreement. PSNH Customers should include both the Interconnection Standards for Inverters Sized up to 100 KVA <b>and</b> Exhibit B – Certification of Completion for Simplified Process Interconnection.	X
• Documentation of the distribution utility's approval of the installation.*	X
• If the facility is participating in another state's renewable portfolio standard (RPS) program, documentation of certification in other state's RPS.	
• A signed and notarized attestation.	X
• A GIS number obtained from the GIS Administrator.	X
• The document has been printed and notarized.	X
• The original and 2 copies are included in the packet mailed to Debra Howland, Executive Director of the PLIC	X

<ul style="list-style-type: none"><li>An electronic version of the completed application has been sent to <u>executive.director@puc.nh.gov</u> .</li></ul>	x
<b>*Usually included in the interconnection agreement.</b>	

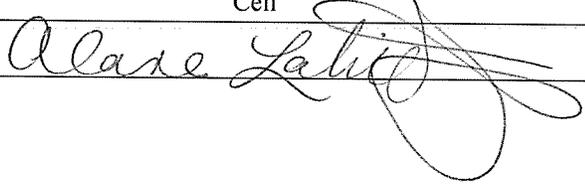
If the application has been prepared by someone other than the applicant, complete the following.  
If the application was prepared by the applicant, check here and skip this section.

**PREPARER'S INFORMATION**

Preparer's Name Alane Lakritz Email address: alane@knollwoodenergy.com

Address PO Box 30 City Chester State NJ Zip 07930

Telephone 862-432-0590 Cell \_\_\_\_\_

Preparer's Signature: 

PSNH Project #13210

PUBLIC SERVICE COMPANY OF NEW HAMPSHIRE  
INTERCONNECTION STANDARDS FOR INVERTERS  
SIZED UP TO 100 KVA (Continued)

RECEIVED  
JUN 16 2014  
SESD

Simplified Process Interconnection Application and Service Agreement

Contact Information:

Date Prepared: 6-5-14

Legal Name and Address of Interconnecting Customer (or, Company name, if appropriate)

Customer or Company Name (print): ROGER WELCH

Contact Person, if Company:

Mailing Address: 66 DUNBAR RD

City: WEARE State: NH Zip Code: 03281

Telephone (Daytime): 603-529-0054 (Evening):

Facsimile Number: E-Mail Address: ramwelch@mygsc.com

Alternative Contact Information (e.g., system installation contractor or coordinating company, if appropriate):

Name: SunRay Solar, LLC

Mailing Address: 249 Loudon Road

City: Concord State: NH Zip Code: 03301

Telephone (Daytime): 602-225-6001 (Evening):

Facsimile Number: E-Mail Address: info@spreadthesunshine.com

Electrical Contractor Contact Information (if appropriate):

Name: SHAWN MARVEL Telephone: 603-209-4304

Mailing Address: 108 SUNAPEE ST #C

City: NEWPORT State: NH Zip Code: 03773

Facility Information:

Address of Facility:

City: State: Zip Code:

Electric Service Company: PSNH Account Number: 56659680011 Meter Number: 536775029

Electricity Supply Company: Account Number:

Generator/Inverter Manufacturer: ENPULSE Model Name and Number: M250 Quantity: 28

Nameplate Rating: 265 (kW) (kVA) (AC Volts) Single or Three Phase

System Design Capacity: 7.9 (kVA) (kVA) Battery Backup: Yes No

Net Metering: If Renewably Fueled, will the account be Net Metered? Yes No

Prime Mover: Photovoltaic Reciprocating Engine Fuel Cell Turbine Other

Energy Source: Solar Wind Hydro Diesel Natural Gas Fuel Oil Other

UL 1741.1 (IEEE 1547.1) Listed? Yes No External Manual Disconnect: Yes No

Estimated Install Date: JUN 6 Estimated In-Service Date: JUNE

Interconnecting Customer Signature

I hereby certify that, to the best of my knowledge, all of the information provided in this application is true and I agree to the Terms and Conditions on the following page:

Customer Signature: Roger Welch Title: HOME OWNER Date: 6/5/14

Please attach any documentation provided by the inverter manufacturer describing the inverter's UL 1741 listing.

Approval to Install Facility (For Company use only)

Installation of the Facility is approved contingent upon the terms and conditions of this Agreement, and agreement to any system modifications, if required (Are system modifications required? Yes No To be Determined)

Company Signature: Michael Upton Title: SR. ENGINEER Date: 6.6.14

7kW AC

PUBLIC SERVICE COMPANY OF NEW HAMPSHIRE  
INTERCONNECTION STANDARDS FOR INVERTERS  
SIZED UP TO 100 KVA  
**Terms and Conditions for Simplified Process Interconnections**

PSNH waives inspection/Witness Test: Yes  No  Date of inspection/Witness Test: Witness Test Waived

1. **Construction of the Facility.** The Interconnecting Customer may proceed to construct the Facility in compliance with the specifications of its Application once the Approval to Install the Facility has been signed by the Company.
2. **Interconnection and operation.** The Interconnecting Customer may operate Facility and interconnect with the Company's system once the all of the following has occurred:
  - 2.1. **Municipal Inspection.** Upon completing construction, the Interconnecting Customer will cause the Facility to be inspected or otherwise certified by the local electrical wiring inspector with jurisdiction.
  - 2.2. **Certificate of Completion.** The Interconnecting Customer returns the Certificate of Completion to the Agreement to the Company at address noted.
  - 2.3. **Company has completed or waived the right to inspection.**
3. **Company Right of Inspection.** The Company will make every attempt within ten (10) business days after receipt of the Certificate of Completion, and upon reasonable notice and at a mutually convenient time, conduct an inspection of the Facility to ensure that all equipment has been appropriately installed and that all electrical connections have been made in accordance with the Interconnection Standard. The Company has the right to disconnect the Facility in the event of improper installation or failure to return Certificate of Completion. All projects larger than 10 kVA will be witness tested, unless waived by the Company.
4. **Safe Operations and Maintenance.** The Interconnecting Customer shall be fully responsible to operate, maintain, and repair the Facility.
5. **Disconnection.** The Company may temporarily disconnect the Facility to facilitate planned or emergency Company work.
6. **Metering and Billing.** All renewable Facilities approved under this Agreement that qualify for net metering, as approved by the Commission from time to time, and the following is necessary to implement the net metering provisions:
  - 6.1. **Interconnecting Customer Provides:** The Interconnecting Customer shall furnish and install, if not already in place, the necessary meter socket and wiring in accordance with accepted electrical standards. In some cases the Interconnecting Customer may be required to install a separate telephone line.
  - 6.2. **Company Installs Meter.** The Company will make every attempt to furnish and install a meter capable of net metering within ten (10) business days after receipt of the Certificate of Completion if inspection is waived, or within 10 business days after the inspection is completed, if such meter is not already in place.
7. **Indemnification.** Interconnecting Customer and Company shall each indemnify, defend and hold the other, its directors, officers, employees and agents (including, but not limited to, Affiliates and contractors and their employees), harmless from and against all liabilities, damages, losses, penalties, claims, demands, suits and proceedings of any nature whatsoever for personal injury (including death) or property damages to unaffiliated third parties that arise out of, or are in any manner connected with, the performance of this Agreement by that party, except to the extent that such injury or damages to unaffiliated third parties may be attributable to the negligence or willful misconduct of the party seeking indemnification.
8. **Limitation of Liability.** Each party's liability to the other party for any loss, cost, claim, injury, liability, or expense, including reasonable attorney's fees, relating to or arising from any act or omission in its performance of this Agreement, shall be limited to the amount of direct damage actually incurred. In no event shall either party be liable to the other party for any indirect, incidental, special, consequential, or punitive damages of any kind whatsoever.
9. **Termination.** This Agreement may be terminated under the following conditions:
  - 9.1. **By Mutual Agreement.** The Parties agree in writing to terminate the Agreement.
  - 9.2. **By Interconnecting Customer.** The Interconnecting Customer may terminate this Agreement by providing written notice to Company.
  - 9.3. **By Company.** The Company may terminate this Agreement (1) if the Facility fails to operate for any consecutive 12 month period, or (2) in the event that the Facility impairs or, in the good faith judgment of the Company, may imminently impair the operation of the electric distribution system or service to other customers or materially impairs the local circuit and the Interconnecting Customer does not cure the impairment.
10. **Assignment/Transfer of Ownership of the Facility.** This Agreement shall survive the transfer of ownership of the Facility to a new owner when the new owner agrees in writing to comply with the terms of this Agreement and so notifies the Company.
11. **Interconnection Standard.** These Terms and Conditions are pursuant to the Company's "Interconnection Standards for Inverters Sized Up to 100 kVA" for the Interconnection of Customer-Owned Generating Facilities, as approved by the Commission and as the same may be amended from time to time ("Interconnection Standard"). All defined terms set forth in these Terms and Conditions are as defined in the Interconnection Standard (see Company's website for the complete document).

Public Service Company Of New Hampshire  
Interconnection Standards For Inverters Sized Up To 100 kVA  
Exhibit B - Certificate of Completion for Simplified Process Interconnections

RECEIVED

AUG 22 2014

**Installation Information:**

Check if owner-installed

Customer or Company Name (print): Roger Welch SESD

Contact Person, if Company: \_\_\_\_\_

Mailing Address: 66 DUNBAR RD

City: WEARE State: NH Zip Code: 03281

Telephone (Daytime): 603 529 0054 (Evening): \_\_\_\_\_

Facsimile Number: \_\_\_\_\_ E-Mail Address: FAM.WELCH@MY.GSC.COM

**Facility Information:**

Address of Facility (if different from above): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Electrical Contractor Contact Information:**

Electrical Contractor's Name (if appropriate): SHAWN MARVEL

Mailing Address: 108 SUNAPEE ST #C

City: NEWPORT State: NH Zip Code: 03773

Telephone (Daytime): \_\_\_\_\_ (Evening): \_\_\_\_\_

Facsimile Number: \_\_\_\_\_ E-Mail Address: MARVEL@INBOX.COM

License number: 13163M

Date of approval to install Facility granted by the Company: \_\_\_\_\_

PSNH Application ID number: #N 3010

**Inspection:**

The system has been installed and inspected in compliance with the local Building/Electrical Code of:

City: WEARE County: HILLSBOROUGH

Signed (Local Electrical Wiring Inspector, or attach signed electrical inspection):

Signature: Charles F. Mealy

Name (printed): CHARLES F. MEALY IV Date: 22 AUG 14

**Customer Certification:**

I hereby certify that, to the best of my knowledge, all information contained in this Exhibit B - Certification of Completion is true and correct. This system has been installed and shall be operated in compliance with applicable standards. Also, the initial start-up test required by Puc. 905.04 has been successfully completed.

Customer Signature: Roger Welch

As a condition of interconnection you are required to send/fax a copy of this form to :

Public Service Company of New Hampshire  
Supplemental Energy Sources Department  
780 North Commercial Street  
P. O. Box 330, Manchester, NH 03105-0330  
Fax No.: (603) 634-2449