



REC 15-102

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

NHPUC 23MAR'15PM1:46

March 19, 2015

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 Thaire Bryant 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

Thaire Bryant  
441 Stewart Rd  
Eaton Center, NH 03832  
603.447.2376  
[campcomfort@myfairpoint.net](mailto:campcomfort@myfairpoint.net)

The Nepoch GIS ID # for this facility is: NON47536. 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,

Linda Modica  
New England REC Operations Manager  
**Knollwood Energy of MA LLC**  
973.879.7826  
[linda@knollwoodenergy.com](mailto:linda@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  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. (mailing address)

Applicant Name Thaire Bryant Email campcomfort@myfairpoint.net  
 Address PO BOX 68 City Eaton Center State NH Zip 03832  
 Telephone 603.447.2376 Cell \_\_\_\_\_

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

Facility Name \_\_\_\_\_ Primary Contact Thaire Bryant  
 Address 441 Stewart Rd City Eaton Center State NH Zip 03832  
 Telephone 603.447.2376 Cell \_\_\_\_\_  
 Email address: campcomfort@myfairpoint.net

- 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	32 32	SolarWorld SW275 Blk SolarWorld SW275Blk	other		
Inverter	1 1	Solaredge SE7600A-US Solar Edge SE10000-SV	other		
meter	1	Itron Centron Fm2s cis 30ta 1.0kh	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)? 17.6 AC  
 What was the initial date of operation (the date your utility approved the facility)? 12/30/14

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

Installer  
 Name Frase Electric LLC Contact Kim Frase License # (if applicable) 4146M  
 Address 789 Whittier Hwy City So. Tamworth State: NH Zip 03883  
 Telephone 603.284.6618 email kim@fraseelectric.com

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

- Provide the name and contact information of the equipment vendor.

X 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 Same as Installer – Frase Electric LLC License # \_\_\_\_\_

Business Name \_\_\_\_\_ Email \_\_\_\_\_

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

- **Provide the name of the independent monitor for this facility.** (A [list](http://www.puc.nh.gov/Sustainable%20Energy/Renewable_Energy_Source_Eligibility.htm) 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 Paul Button Energy Audits Unlimited

Is the facility certified under another state's renewable portfolio standard?    yes     no    
 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 # NON47536                      Asset ID # NON47536

- **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. (please see attached)

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Applicant's Printed Name Linda Modica

Subscribed and sworn before me this \_\_\_\_\_ Day of \_\_\_\_\_ (month) in the year \_\_\_\_\_

County of \_\_\_\_\_ State of \_\_\_\_\_

\_\_\_\_\_  
Notary Public/Justice of the Peace

My Commission Expires \_\_\_\_\_

- 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 <i>the Interconnection Standards for Inverters Sized up to 100 KVA</i> <b>and</b> <i>Exhibit B – Certification of Completion for Simplified Process Interconnection</i> .	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 PUC.	x
• An electronic version of the completed application has been sent to <a href="mailto:executive.director@puc.nh.gov">executive.director@puc.nh.gov</a> .	x
<i>*Usually included in the interconnection agreement.</i>	

- 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 Linda Modica Email address: [linda@knollwoodenergy.com](mailto:linda@knollwoodenergy.com)

Address PO Box 30 City Chester State NJ Zip 07930

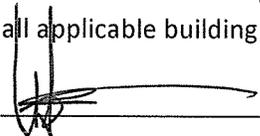
Telephone 973.879.7826 Cell \_\_\_\_\_

Preparer’s Signature: \_\_\_\_\_  


- 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.

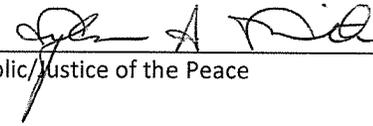
Applicant's Signature  Date 3/19/15

Applicant's Printed Name Linda Modica

Subscribed and sworn before me this 19 Day of March (month) in the year 2015

County of Morris State of New Jersey

**SYLVIA A. SMITH**  
Notary Public  
State of New Jersey  
My Commission Expires Jan. 6, 2019  
I.D.# 2309220

  
Notary Public/Justice of the Peace

My Commission Expires \_\_\_\_\_

Phase 1

PSNH Project ID # N3191

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

RECEIVED  
OCT 10 2014

Simplified Process Interconnection Application and Service Agreement **SESD**

Contact Information:

Date Prepared: \_\_\_\_\_

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

Customer or Company Name (print): Thaire B. Bryant, Deborah M. Bryant

Contact Person, if Company:

Mailing Address: P.O. Box 68

City: Eaton Center State: NH. Zip Code: 03832

Telephone (Daytime): 603-447-2376 (Evening): 603-447-2376

Facsimile Number: N/A E-Mail Address: campcomfort@myfairpoint.net

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

Name: Kim Frase (contractor) Frase Electric LLC

Mailing Address: 789 Whittier Highway

City: South Camworth State: NH. Zip Code: 03883

Telephone (Daytime): 603-284-6618 (Evening): \_\_\_\_\_

Facsimile Number: 603-284-6343 E-Mail Address: Kim@fraseelectric.com

Electrical Contractor Contact Information (if appropriate):

Name: SAME Telephone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

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

Facility Information:

Address of Facility: 441 Stewart Rd

City: Eaton Center State: NH. Zip Code: 03832

Electric Service Company: PSNH Account Number: 56478251044 ✓ Meter Number: 569 145 569 ✓

Electricity Supply Company: \_\_\_\_\_ Account Number: \_\_\_\_\_

Generator/Inverter Manufacturer: SOLAREDGE ✓ Model Name and Number: SE10000 AW Quantity: 1 ✓

Nameplate Rating: 10000 (kW) 10000 (kVA) 240 (AC Volts) Single 1 or Three \_\_\_\_\_ Phase

System Design Capacity: 10000 (kVA) 10000 (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: 11/1/14 Estimated In-Service Date: 11/10/14

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: Thaire B. Bryant Title: Owner Date: 10/9/14

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 Motta Title: SR. ENGINEER Date: 10.27.14

Phase 2 - This will be added after the first 10kw Inverter # B

Operational. 10/9  
Scanned &  
entered to  
Public

PSNH Project ID # N 3191

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

RECEIVED

OCT 10 2014

Simplified Process Interconnection Application and Service Agreement

Contact Information: Date Prepared: \_\_\_\_\_  
Legal Name and Address of Interconnecting Customer (or, Company name, if appropriate)  
Customer or Company Name (print): Thaire B. Bryant, Deborah M. Bryant **SESD**  
Contact Person, if Company: \_\_\_\_\_  
Mailing Address: P.O. Box 68  
City: Eaton Center State: NH. Zip Code: 03832  
Telephone (Daytime): 603-447-2376 (Evening): 603-447-2376  
Facsimile Number: N/A E-Mail Address: campcomfort@myfairpoint.net

Alternative Contact Information (e.g., system installation contractor or coordinating company, if appropriate):  
Name: Kim Frase (contractor) Frase Electric LLC  
Mailing Address: 789 Whittier Highway  
City: South Camworth State: NH. Zip Code: 03883  
Telephone (Daytime): 603-284-6618 (Evening): \_\_\_\_\_  
Facsimile Number: 603-284-6343 E-Mail Address: Kim@fraseelectric.com

Electrical Contractor Contact Information (if appropriate):  
Name: SAAME Telephone: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Facility Information:  
Address of Facility: 441 Stewart Rd  
City: Eaton Center State: NH. Zip Code: 03832  
Electric Service Company: PSNH Account Number: 56478251044 Meter Number: 569 145 569  
Electricity Supply Company: \_\_\_\_\_ Account Number: \_\_\_\_\_  
Generator/Inverter Manufacturer: SolarEdge Model Name and Number: SE 7600AUS Quantity: 1  
Nameplate Rating: 7600 (kW) 7600 (kVA) 240 (AC Volts) Single  or Three \_\_\_\_\_ Phase  
System Design Capacity: 17600 (kVA) 17600 (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: 11/20/14 Estimated In-Service Date: 11/30/14

7.6kW  
AC

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: Thaire B. Bryant Title: Owner Date: 10/9/14  
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 Motta Title: SR ENGINEER Date: 10.27.14

PLANS 1 + 2 MAR 4

RECEIVED  
DEC 16 2014  
SESD

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

**Exhibit B - Certificate of Completion for Simplified Process Interconnections**

Installation Information:

Check if owner-installed

Customer or Company Name (print): Thaire B. Bryant, Deborah M. Bryant  
Contact Person, if Company: \_\_\_\_\_  
Mailing Address: PO Box 68  
City: Easton Center State: NH Zip Code: 03832  
Telephone (Daytime): 603-447-2376 (Evening): 603-447-2376  
Facsimile Number: N/A E-Mail Address: campcomfort@myfairpoint.net

Address of Facility (if different from above): 441 Stewart Rd.  
City: Easton Center State: NH Zip Code: 03832  
Generation Vendor: FRASE ELECTRIC Contact Person: KIM FRASE

I hereby certify that the system hardware is in compliance with Puc 900.

Vendor Signature: [Signature] Date: 12/5/14

Electrical Contractor's Name (if appropriate): Fraser Electric LLC  
Mailing Address: 789 Whittier Hwy  
City: So. Tamworth State: NH Zip Code: 03883  
Telephone (Daytime): 603-284-6618 (Evening): \_\_\_\_\_  
Facsimile Number: 603-284-6343 E-Mail Address: Kim@fr  
License number: 4146M

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

Application ID number: N3191

Inspection:

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

(City/County)

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

Name (printed): KIM FRASE

Date: \_\_\_\_\_

Customer Certification:

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

Customer Signature: Thaire B. Bryant Date: 12/3/14

Deborah M. Bryant



L.L.C.

Kim Frase – NH Lic #4146  
Phone – 603- 284-6618  
Fax – 603-284-6343  
789 Whittier Highway  
South Tamworth, N.H. 03883  
Email – kim@fraseelectric.com

DATE: DECEMBER 12, 2014

JOB NAME: THAIRE BRYANT

FRASE ELECTRIC LLC HAS INSPECTED THE PV INSTALLATION AT 441 STEWART ROAD, EATON CENTER, NEW HAMPSHIRE.

TO THE BEST OF MY KNOWLEDGE IT HAS BEEN INSTALLED TO MEET ALL STATE AND FEDERAL ELECTRIC CODES AS WELL AS POWER COMPANY REQUIREMENTS.

SINCERELY,

KIM FRASE.