



KNOLLWOOD ENERGY

REC 16-069  
Knollwood Energy of MA LLC  
P.O. Box 30  
Chester, New Jersey 07930

January 9, 2016

NHPUC 13 JAN 16 AM 11:16

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 applications for 12 systems 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.

Also enclosed are the Simplified Process Interconnection Application and Service Agreement, and the Certificate of Completion.

Electronic versions have been entered into the new online application system under batch number KN16001.

Dan Ball	Nathan Hamilton
Walter Collins Jr.	John Howard
Tom D'Aprix	Paul Johnson
Charles Dylun	David Leuser
<b>Don Gagne</b>	Dan Mariotti
Charles Gouin	Brent McGregor

Please feel free to contact me with any questions or further instructions.  
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)

## NH Public Utilities Commission

### REC Aggregator Portal

---

New Users [CLICK HERE](#) to setup your account for this form. Creating an account enables you to partially complete the form and return later to finish it or to make changes after the form is submitted. Be sure to create your account **BEFORE** entering information into the form, or the information will be lost.

Existing Users [CLICK HERE](#)

#### Basic Information

---

Who is submitting this request?

Aggregator

Aggregator Batch Number

KN16001

Executive Director email

PUC - Executive Director

Aggregator name

Knollwood Energy

Aggregator Email

linda@knollwoodenergy.com

Other Aggregator name

Other aggregator email address

Facility Owner Name

Donald Gagne

Facility Owner email

donald.gagne@myfairpoint.net

Owner Phone

603-736-3310

Facility Address

54 Towle Pasture Dr

Facility Town/City

Epsom

Facility State

NH

Facility Zip

03234

Is the facility address the same as the owner's mailing address

- Yes
- No

Mailing Address

Mailing Town/City

Mailing State

Mailing Zip

Primary Contact (who should we call with questions)

Linda Modica

Contact Phone

Other Email Address

Facility Information

---

Class

II

Utility

Unitil

Other Utility Name

To obtain a GIS ID contact:

James Webb

408 517 2174

jwebb@apx.com

GIS ID (include "NON")

Facility Operator Name, if applicable

Panel Quantity

Panel Make

Panel Model

Panel Rated Output

System capacity based on panels

Inverter Quantity

Inverter Make

Inverter Rated Output

Add'l Inverter Quantity

Additional Inverter Make

None

Add'l Inverter Model

Rated Output - Primary Inverter

215

Rated Output - Additional Inverter

System capacity based on single inverter make

0.05

System capacity based on two inverter types

System capacity in mW as stated on the interconnection agreement

4.73

Revenue Grade Meter Make

Hialeah

Was this facility installed directly by the customer (no electrician involved)?

- Yes
- No

Electrician Name & Number

Justin Thomas0366C

Other Electrician Name & Number

Installation Company

Granite State Solar

Other Installation Company Name

Other Inst. Company Address

Other Inst. Company City

Other Inst. Company State

Other Inst. Company Zip

Independent Monitor Name

Monitor Company Name

Monitor Company Name

Monitor Company Name

Monitor Company Name

Other Monitor Company Name

Is the installer also the equipment vendor?

- Yes
- No

Equipment Vendor

Please attach your completed interconnection agreement including Exhibit B.

The project described in this application will meet the metering requirements of PUC 2506 including:

Electricity generation in megawatt hours shall be reported to the GIS quarterly with a statement that the submission is accurate by the owner of the source, the independent monitor or a designated representative.

A revenue quality meter is used to measure the electricity generated.

The facility owner has certified to the independant monitor that the meter operaes according to manufacturing standards.

The meter shall be maintained according to the manufacturer's recommendations.

The project is installed and operating in conformance with applicable building codes.

A copy of the facility's interconnection agreement is attached.

Please attach additional document here

[https://fs30.formsite.com/jan1947/files/f-5-168-5797952\\_qVCHsmuy\\_gagne\\_NHOS.pdf](https://fs30.formsite.com/jan1947/files/f-5-168-5797952_qVCHsmuy_gagne_NHOS.pdf)

Please attach additional document here

[https://fs30.formsite.com/jan1947/files/f-5-173-5797952\\_ohMEocET\\_Donald\\_Gagne\\_COC.pdf](https://fs30.formsite.com/jan1947/files/f-5-173-5797952_ohMEocET_Donald_Gagne_COC.pdf)

Aggregator statement of accuracy

Sign your name using a mouse or, if you are using a touch-screen device, a stylus or other pointer.



Print Name

Linda Modica

Date Signed

01/02/2016



UNITIL ENERGY SYSTEMS, INC.  
 INTERCONNECTION STANDARDS FOR INVERTERS  
 SIZED UP TO 100 KVA (Continued)

**Simplified Process Interconnection Application and Service Agreement**

Contact Information: Date Prepared: 7/28/15  
 Legal Name and address of Interconnecting Customer (or, Company name, if appropriate)  
 Customer Name (print): Donald Gagne Contact Person, if Company: \_\_\_\_\_  
 Mailing Address: 54 Towle Pasture Dr  
 City: Epsom State: New Hampshire Zip Code: 03234  
 Telephone (Daytime): (603) 736-3310 (Evening): \_\_\_\_\_  
 Facsimile Number: \_\_\_\_\_ E-Mail Address: donald.gagne@myfairpoint.net

Alternative Contact Information (e.g., system installation contractor or coordinating company, if appropriate):  
 Name: Granite State Solar  
 Mailing Address: 197 North Main St  
 City: Boscawen State: New Hampshire Zip Code: 03303  
 Telephone (Daytime): (603) 369-4318 (Evening): \_\_\_\_\_  
 Facsimile Number: \_\_\_\_\_ E-Mail Address: justin@granitestatesolar.com

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

Facility Information:  
 Address of Facility: 54 Towle Pasture Dr  
 City: Epsom State: New Hampshire Zip Code: 03234  
 Electric Service Company: Unitil Account Number: 1172493-1035060 Meter Number: 464221 ✓  
 Inverter Manufacturer: Enphase Model Name and Number: m215 Quantity: 22  
 Nameplate Rating: .215 (kW) \_\_\_\_\_ (kVA) \_\_\_\_\_ (AC Volts) Single  or Three \_\_\_\_\_ Phase  
 System Design Capacity: 4.73 (kVA) \_\_\_\_\_ (kVA)  
 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 \_\_\_\_\_  
 Estimated Install Date: August Estimated In-Service Date: August

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:  
 Interconnecting Customer Signature: Donald Gagne Title: Homeowner Date: 8/13/2015  
 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: [Signature] Title: MGD D.Sc. Date: 9/25/15  
 Company waives inspection/Witness Test? Yes \_\_\_\_\_ No \_\_\_\_\_



Certificate of Completion for Interconnection

Installation Information: \_\_\_\_\_ Check if owner-installed

Customer or Company Name (print): Donald Gagne  
Contact Person, if Company: \_\_\_\_\_  
Mailing Address: 54 Towle Pasture Dr  
City: Epsom State: NH Zip Code: 03234  
Telephone (Daytime): (603) 736-3310 (Evening): \_\_\_\_\_  
Facsimile Number: \_\_\_\_\_ E-Mail Address: donald.gagne@myfairpoint.net

Address of Facility (if different from above): \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Electrical Contractor's Name (if appropriate): Granite State Solar  
Mailing Address: 197 North Main St  
City: Boscawen State: NH Zip Code: 03303  
Telephone (Daytime): (603) 369-4318 (Evening): \_\_\_\_\_  
Facsimile Number: \_\_\_\_\_ E-Mail Address: justin@granitestatesolar.com  
License number: 0366 C State: NH

Date of approval to install Facility granted by the Company: 9/29/2015

Application ID number: #1238

Inspection:

The system has been installed and inspected in compliance with the local Building/Electrical Code of  
Epsom Fire Dept Merrimack NH.  
(City/County/State)

Signed (Local Electrical Wiring Inspector, or attach signed electrical inspection): [Signature]  
Name (printed): Matthew Boulton  
Date: 10-19-15

As a condition of interconnection you are required to send a copy of this form along with a copy of the signed electrical permit to Unitil at the following address:

Unitil Corporation  
Attention: Generator Interconnections  
6 Liberty Lane West  
Hampton, NH 03842

New Hampshire PUC REC Certification Application Owner Statements

The information provided on this application for New Hampshire Renewable Energy Certificate eligibility is accurate to the best of my knowledge and I authorize Knollwood Energy to act on my behalf in filing said application.

The project described in this application will meet the metering requirements of PUC 2506 including:

Electricity generation in megawatt hours shall be reported to the GIS quarterly with a statement that the submission is accurate by the owner of the source, the independent monitor, or a designated representative.

A revenue quality meter is used to measure the electricity generated.

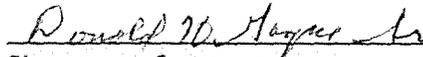
The facility owner has certified to the independent monitor that the meter operates according to manufacturing standards.

The meter shall be maintained according to the manufacturer's recommendations.

The project is installed and operating in conformance with applicable building codes.

DONALD GAGNE

Printed Name of signature owner

  
Signature of system owner