



KNOLLWOOD ENERGY

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

January 13, 2016

NHPUC 19JAN'16PM2:55

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 KN16004.

Dan Jean	Peter Mans
Budd Konn	William Mealey
Don Kraemer	Donald Melvin
Donald LaPerle	Bruce Mills
Ray MacDonald	Carrie Nolet/Lucie Swain
Galen Lanpier	Ryan Morency

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

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

KN16004

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 Kraemer

Facility Owner email

dkraemer119@gmail.com

Owner Phone

603-736-4041

Facility Address

129 Black Hall Road

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")

Date of Initial Operation

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

NA

Additional Inverter Make

None

Add'l Inverter Model

Rated Output - Primary Inverter

215

Rated Output - Additional Inverter

System capacity based on single inverter make

0.04

System capacity based on two inverter types

System capacity in mW as stated on the interconnection agreement

4.3

Revenue Grade Meter Make

AEE Solar

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

- Yes
- No

Electrician Name & Number

Brian Pare12245M

Other Electrician Name & Number

Installation Company

SunRay Solar

Other Installation Company Name

Other Inst. Company Address

Other Inst. Company City

Other Inst. Company State

Other Inst. Company Zip

Independent Monitor Name & Company

Other Monitor Name and Company

Is the installer also the equipment supplier?

- 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 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.

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

Please attach additional document here

https://fs30.formsite.com/jan1947/files/f-5-168-5873966_V1L6AegX_Kraemer_COC.pdf

Please attach additional document here

https://fs30.formsite.com/jan1947/files/f-5-173-5873966_4uyw1SDK_Kraemer_NHOS.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

01/13/2016



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: 7-25-15
Legal Name and address of Interconnecting Customer (or, Company name, if appropriate)
Customer Name (print): Donald A Kraemer Contact Person, if Company: _____
Mailing Address: 129 Black Hall Rd.
City: Epsom State: NH Zip Code: 03234
Telephone (Day time): 603 736-4041 (Evening): 603 736-4041
Facsimile Number: _____ E-Mail Address: dkraemer119@gmail.com

cell:
603
867-4719

Alternative Contact Information (e.g., system installation contractor or coordinating company, if appropriate):
Name: SunRay Solar, LLC
Mailing Address: 124A Hall Street
City: Concord State: NH Zip Code: 03301
Telephone (Day time): 603-225-6001 (Evening): _____
Facsimile Number: _____ E-Mail Address: Amanda@spreadthesunshine.com

Electrical Contractor Contact Information (if appropriate):
Name: SunRay Solar, LLC Telephone: 603-225-6001
Mailing Address: 124A Hall Street
City: Concord State: NH Zip Code: 03301

Facility Information:
Address of Facility: 129 Black Hall Rd
City: Epsom State: NH Zip Code: 03234
Electric Service Company: Unitil Account Number: 1175779-1035162 Meter Number: 473710
Inverter Manufacturer: Enphase Model Name and Number: M215 Quantity: 20
Nameplate Rating: 215 (kW) _____ (kVA) _____ (AC Volts) Single or Three _____ Phase
System Design Capacity: 5.4kVA (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 2015 Estimated In-Service Date: August 2015

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 A Kraemer Title: Home Owner Date: 7-25-15
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: _____ Title: _____ Date: 2015 06 25
Company waives inspection/Witness Test? Yes ___ No ___



UNITIL ENERGY SYSTEMS, INC.
 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(print): Donald A Kraemer
 Mailing Address: 129 Black Hall Rd
 City: Epsom State: NH Zip Code: 03234
 Telephone (Daytime): 603 867-4719 (Evening): 603 736-4041
 Facsimile Number: _____ E-Mail Address: dkraemer119@gmail.com

Address of Facility (if different from above): same
 City: _____ State: _____ Zip Code: _____

Electrical Contractor's Name (if appropriate): SunRay Solar, LLC
 Mailing Address: 124A Hall Street
 City: Concord State: NH Zip Code: 03301
 Telephone (Daytime): 603-225-6001 (Evening): _____
 Facsimile Number: _____ E-Mail Address: brad@spreadthesunshine.com
 License number: 12245M

Date of approval to install Facility granted by the Company: _____

Application ID number: _____

Inspection:

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

Town of Epsom
 (City/County)

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

Name (printed): M Moulton

Date: 9/1/15

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

Generator Interconnection Applications
 Unitil
 325 West Road
 Portsmouth, NH 03801
 Fax: 603-294-5226

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.

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

Donald. A. Kraemer

Printed Name of signature owner

Donald A. Kraemer

[Donald A. Kraemer \(Nov 27, 2015\)](#)

Signature of system owner