

NH Public Utilities Commission

NHPUC 27APR'16AM11:48

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 Batch Number

Are you registered in NH

- Yes
 No

Aggregator name

NH Reg #

Aggregator Email

Other Aggregator name

Other aggregator email address

Facility Name

Facility Owner Name

Facility Owner email

jsalanzo1@gmail.com

Owner Phone

617-515-0597

Facility Address

21 Wood Ridge Road

Facility Town/City

Center Harbor

Facility State

NH

Facility Zip

03226

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

Karen Tenneson

Primary Contact

Facility Primary Contact

karenton@knollwoodenergy.com

Other Email Address

Facility Information

Class

Utility

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 Make #1

Panel Model

Panel Quantity

Panel Rated Output

More Panel types?

- No
- Yes

Panel Make #2

Panel Model

Panel Quantity

Panel Rated Output

More Panel types?

- No
- Yes

Panel Make #3

Panel Model

Panel Quantity

Panel Rated Output

System capacity based on panels

Inverter Quantity

Inverter Make

Add'l Inverter Quantity

Additional Inverter Make

Rated Output - Primary Inverter

215

Rated Output - Additional Inverter

System capacity based on single inverter make

7955

System capacity based on two inverter types

System capacity in kW as stated on the interconnection agreement

9.99

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

Paul Button - Energy Audits Unlimited

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.

https://fs30.formsite.com/jan1947/files/f-5-99-6607058_OKprqK7x_Alonzo_IC_copy.pdf

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.

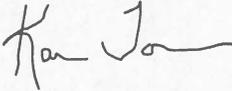
Please attach additional document here

https://fs30.formsite.com/jan1947/files/f-5-168-6607058_eC0JmIZZ_Alonzo_NHOS.pdf

Please attach additional document here

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

Date Signed

**NEW HAMPSHIRE ELECTRIC CO-OP
"ABOVE THE CAP"
INTERCONNECTION APPLICATION-RENEWABLE GENERATION UP TO 1000 KW**

PURSUANT TO NEW HAMPSHIRE ELECTRIC COOPERATIVE TERMS & CONDITIONS, SECTION X. NET METERING, APPLICANT HEREBY GIVES NOTICE OF INTENT TO INSTALL AND OPERATE A GENERATING FACILITY.

Applicant Information

Name: Joseph Alonzo

Mailing Address: 21 Ridge Road

City: Center Harbor State: NH Zip Code: 03226

Facility Location (if different from above): _____

Daytime Phone Number: 617-515-0957

Distribution Utility: New Hampshire Electric Cooperative, Inc. Account Number: [REDACTED]

Electricity Supplier (ES): _____ Account Number: _____

Generating Facility Information

Generator Type (check one): Solar Wind Hydro

Generator Manufacturer, Model Name & Number: SunEdison, Silvantis F-Series, F270, 37 panels

Number of Phases of Unit: Single Three Other

Generation output rating in AC & DC Kilowatts: 9.99kW AC 7.95kW DC

Inverter Manufacturer, Model Name & Number: Enphase, M215, 37 inverters

Battery backup? Yes No

Will a generator Disconnect Switch accessible to the utility be installed? Yes No

Proposed location of Disconnect Switch, if applicable: outside next to meter

Installation Information & Certification

Installer: SunRay Solar, LLC Check if owner-installed

Installation Date: September 2015

Installing Electrician: Brian Pare of SunRay Solar State of NH License #: 12245M

Mailing Address: 124A Hall Street, Concord, NH 03301

Daytime Phone Number: 603-225-6001

Installation Information & Certification continued

The system hardware is listed to Underwriters Laboratories standards to be in compliance with UL1741 and IEEE 929-2000:

Signed (Vendor/Supplier): Amanda Murphy

Name (Printed): Amanda Murphy Date: 11/13/2015

Company: SUN RAY SOLAR, LLC

Company Address: 124 A Hall Street, Concord, NH 03301

The system has been installed in compliance with local Building/Electrical Code of City/County: Centers Harbor

Signed (Electrician or Town Inspector): Kenneth Ballance

Print Name: Kenneth Ballance Date: 9/21/15

*In lieu of signature by inspector, a copy of final inspection certificate may be attached Town of Centers Harbor
Compliance Officer
Kenneth Ballance

The initial start-up test required by Section X.2.7 has been successfully completed by the electrician.

Completed on: 9/21/15 Witnessed By: [Signature]

Utility signature to signify only receipt of this form, in compliance with the NHEC's Terms & Conditions. .

Signed (NHEC): [Signature]

Print Name: JOHN MCNEIL Date: 10-29-15

Signed (Electricity Supplier Representative): _____

Date: _____ Interconnection Date: 10-29-15

Applicant agrees to install and operate the system in accordance with NHEC's Terms & Conditions.

I hereby certify that, to the best of my knowledge, all of the information provided in this Application is true and correct.

Signature of Applicant: [Signature] Date: 8/10/15

THE ELIGIBLE CUSTOMER-GENERATOR SHALL PROVIDE NEW HAMPSHIRE ELECTRIC CO-OP WITH A WRITTEN UPDATE OF THE INFORMATION ON THIS FORM AS ANY CHANGES OCCUR.

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.

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Joseph S Alonzo

Printed Name of signature owner

Joseph S Alonzo
Joseph S Alonzo (Apr 7, 2016)

Signature of system owner