

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 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

Jrpgagnon@gmail.com

Owner Phone

603-724-5576

Facility Address

44 Wing 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

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

320

Rated Output - Additional Inverter

System capacity based on single inverter make

9600

System capacity based on two inverter types

System capacity in kW as stated on the interconnection agreement

9.81

Revenue Grade Meter Make

Hialeah

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

- Yes
 No

Electrician Name & Number

Troy Diamond 12218M

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 & 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-5-99-6804324_oRm93GoS_Gagnon_IC.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

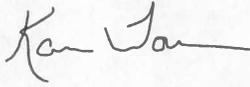
https://fs30.formsite.com/jan1947/files/f-5-168-6804324_JqOWcPJ9_Gagnon_-_NHOS_1.pdf

Please attach additional document here

https://fs30.formsite.com/jan1947/files/f-5-173-6804324_yHtsy46D_Gagnon_SIA.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

Karen Tonnesen

Date Signed

05/17/2016



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: 12/1/15
Legal Name and address of Interconnecting Customer (or. Company name, if appropriate)
Customer Name (print): John Gagnon Contact Person, if Company: _____
Mailing Address: 44 Wing Rd
City: Epsom State: New Hampshire Zip Code: 03234
Telephone (Daytime): (603) 724-5576 (Evening): (603) 736-8054
Facsimile Number: _____ E-Mail Address: skgagnon26@gmail.com

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: 44 Wing Rd
City: Epsom State: New Hampshire Zip Code: 03234
Electric Service Company: _____ Account Number: 115701-1019284 Meter Number: 100431
Inverter Manufacturer: SunPower Model Name and Number: E20-327 Quantity: 30
Nameplate Rating: 320.327 kW (kW) _____ (kVA) _____ (AC Volts) Single or Three _____ Phase
System Design Capacity: 9.6 9.81 kVA (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: TBD Estimated In-Service Date: TBD

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: _____ Title: Homeowner Date: 12/1/15

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: Mar. Diaz Date: 11/6/16
Company waives inspection/Witness Test? Yes _____ No _____

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.

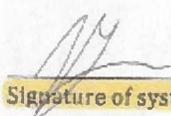
The facility owner has certified to the independent monitor that the meter operates according to manufacturing standards.

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

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

JOHN GAGNON

Printed Name of signature owner


Signature of system owner



661-0186

44 wing.

Certificate of Completion for Interconnection

Installation Information:

Check if owner-installed

Customer or Company Name (print): JOHN GAGNON

Contact Person, if Company:

Mailing Address: 44 WING RD

City: EPSOM State: NH Zip Code: 03234

Telephone (Daytime): (603) 724-5576 (Evening): (603) 736-8054

Facsimile Number: E-Mail Address: skgagnon26@gmail.com

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: 01/06/2016

Application ID number: 1727

Inspection:

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

Town of EPSOM

(City/County/State)

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

Name (printed): MATTHEW MOULTON Capt.

Date: 4-8-16

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