

**AGRICULTURAL NET METERING OR NET METERING INTERCONNECTION NOTIFICATION**

PURSUANT TO RULE 20 VAC 5-315-30 OF THE COMMISSION'S REGULATIONS GOVERNING NET ENERGY METERING, APPLICANT HEREBY GIVES NOTICE OF INTENT TO OPERATE A GENERATING FACILITY.

Customers shall initially complete Sections 1-4 and submit to the utility for review and approval prior to installation. Once approved by the utility the customer may complete installation and re-submit the form with Section 5 completed.

**Section 1. Applicant Information** Check:  Ag Net Metering;  Power Purchase Agreement

Name: \_\_\_\_\_

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

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

Phone Number(s): \_\_\_\_\_

Fax Number: \_\_\_\_\_ Email: \_\_\_\_\_

Distribution Utility: \_\_\_\_\_ Account Number: \_\_\_\_\_

Energy Service Provider (ESP) (if different than electric distribution company): \_\_\_\_\_

ESP Account Number (if applicable): \_\_\_\_\_

Proposed Interconnection Date \_\_\_\_\_

**Section 2. Generator Information** (Add sheets for multiple generating units.)

Owner and/or Operator Name (if different from Applicant):

\_\_\_\_\_

Business Relationship to Applicant: \_\_\_\_\_

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

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

Phone Number(s): \_\_\_\_\_

Fax Number: \_\_\_\_\_ Email: \_\_\_\_\_

Street Address of Generating Unit: \_\_\_\_\_

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

Fuel Type: \_\_\_\_\_

Generator Manufacturer and Model: \_\_\_\_\_

Rated Capacity in kilowatts: AC \_\_\_\_\_ DC \_\_\_\_\_

Inverter Manufacturer and Model: \_\_\_\_\_

Battery Backup (circle one): Yes No

**Section 3. Information for Facilities with an AC Capacity in Excess of 25 kilowatts**

Generator Type (circle one): Inverter Induction Synchronous

Frequency: \_\_\_\_\_ Hz; Number of phases (circle one): One Three

Rated Capacity: DC \_\_\_\_\_ kW; AC apparent \_\_\_\_\_ kVA; AC real \_\_\_\_\_ kW;

Power factor \_\_\_\_\_%; AC voltage \_\_\_\_\_; AC amperage \_\_\_\_\_

Facility schematic and equipment layout must be attached to this form.

**Section 4. Vendor Certification**

The system hardware is listed by Underwriters Laboratories to be in compliance with UL 1741.

Signed (Vendor): \_\_\_\_\_ Date: \_\_\_\_\_

Name (printed): \_\_\_\_\_ Phone Number: \_\_\_\_\_

Company: \_\_\_\_\_ Email: \_\_\_\_\_

**Section 5. Electrician Certification** (If not electrician-installed, attach final electrical inspection.)

The system has been installed in accordance with the manufacturer's specifications as well as all applicable provisions of the National Electrical Code.

Signed (Licensed Electrician): \_\_\_\_\_ Date: \_\_\_\_\_

Name (printed): \_\_\_\_\_

License Number: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Mail Address: \_\_\_\_\_

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

Utility signature signifies only receipt of this form, in compliance with the Commission's net energy metering regulations, Regulation 20 VAC 5-315-30.

Signed (Utility Representative): \_\_\_\_\_ Date: \_\_\_\_\_

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

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_