

Central Georgia  
Electric Membership Corporation  
Distributed Generation Policy

Appendix A

APPLICATION FOR  
INTERCONNECTION OF  
DISTRIBUTED GENERATION FACILITY

# Central Georgia Electric Membership Corporation

## Application for Interconnection of Distributed Generation Facility

This application should be completed and returned to the Cooperative Customer Service representative at least forty-five (45) days prior to the customer's proposed interconnection date in order to begin processing the request. **Customers must not operate their distributed generation facilities in parallel with Central Georgia EMC's distribution system until they have received written authorization for parallel operation from Central Georgia EMC. Unauthorized parallel operation of customer's distributed generation facilities could result in injury to persons and/or damage to equipment or property.**

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### SECTION 1 - CONTACT INFORMATION

#### **A. CUSTOMER/APPLICANT INFORMATION**

Customer/Applicant Name: \_\_\_\_\_

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

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

Phone Number: \_\_\_\_\_ Representative: \_\_\_\_\_

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

#### **B. ELECTRICAL CONTRACTOR**

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

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

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

Phone Number: \_\_\_\_\_ Representative: \_\_\_\_\_

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

### SECTION 2 - GENERATING FACILITY INFORMATION

Generator Type (Check One)      Photovoltaic\_\_\_\_, Wind\_\_\_\_, Fuel Cell\_\_\_\_, Hydro\_\_\_\_,  
Other \_\_\_\_\_

Generator Manufacturer: \_\_\_\_\_

Generator Model Name & Number: \_\_\_\_\_

Generator Power Rating (KW): \_\_\_\_\_

Disconnect Switch Manufacturer / Model Number: \_\_\_\_\_

Disconnect Switch Rating (A): \_\_\_\_\_

#### **INVERTER DATA (if applicable)**

Manufacturer: \_\_\_\_\_ Model: \_\_\_\_\_

Rated Power Factor (%): \_\_\_\_\_ Rated Voltage (Volts): \_\_\_\_\_ Rated Amperes: \_\_\_\_\_

Inverter Type (ferroresonant, step, pulse-width modulation, etc): \_\_\_\_\_

Type commutation:    forced            line

Harmonic Distortion: Maximum Single Harmonic (%) \_\_\_\_\_

Maximum Total Harmonic (%) \_\_\_\_\_

Note: Attach all available calculations, test reports, and oscillographic prints showing inverter output voltage and current waveforms.

**SECTION 3 - ONE-LINE DIAGRAM AND ADDITIONAL INFORMATION**

In addition to the items listed above, please attach **a detailed one-line diagram of the proposed facility**, all applicable elementary diagrams, major equipment, (generators, transformers, inverters, circuit breakers, protective relays, etc.) specifications, test reports, etc., and any other applicable drawings or documents necessary for the proper design of the interconnection. Also describe the project's planned operating mode (e.g., combined heat and power, peak shaving, etc.).

**SECTION 4 - INSTALLATION INFORMATION**

Installation Date: \_\_\_\_\_ Proposed Interconnection Date \_\_\_\_\_

**AGREE AND ACCEPT**

Customer agrees to provide the Cooperative with any additional information required to complete the interconnection. Customer shall operate his equipment within the guidelines set forth by the Cooperative.

\_\_\_\_\_  
Customer/Applicant \_\_\_\_\_  
Date

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**ELECTRIC COOPERATIVE CONTACT FOR APPLICATION SUBMISSION AND FOR MORE INFORMATION:**

Cooperative contact: Herschel Arant  
Title: Vice President of Engineering Services  
Address: 923 South Mulberry Street  
Jackson, GA 30233  
Phone: 770-775-7857 Fax: 770-775-1714  
E-mail: [harant@cgemc.com](mailto:harant@cgemc.com)

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