

**GENERATION INTERCONNECTION REQUEST
(Application Form)**

For generation greater than 40 kW connecting to 100 kV and below

Transmission Owner: Southern Illinois Power Cooperative (SIPC)
Designated Contact Person: Attn: Manager Power Delivery
Address: 11543 Lake of Egypt Rd.
Marion, IL 62959
Telephone Number: (618) 964-1448

An Interconnection Request is considered complete when it provides all applicable and correct information required below as well as the processing fee discussed below.

Preamble and Instructions

An Interconnection Customer who requests an interconnection must submit this Interconnection Request by hand delivery, mail, e-mail, or fax to the Transmission Owner.

Processing Fee or Deposit

The Interconnection Customer shall submit to the Transmission Owner a non-refundable deposit of either Five Thousand Dollars (\$5,000) for sites less than or equal to 5 MW or Twenty Thousand Dollars (\$20,000) for sites greater than 5 MW but smaller than 50 MW towards the cost of required studies and equipment. All application processing fees will be applied to the total interconnection cost if an Interconnection Agreement is fully executed.

Interconnection Customer Information

Legal Name of the Interconnection Customer (or, if an individual, individual's name)

Name: _____

Contact Person: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Facility Location (if different from above): _____

Telephone (Primary): _____ Telephone (Alternate): _____

Fax: _____ E-Mail Address: _____

Alternative Contact Information (if different from the Interconnection Customer)

Contact Name: _____

Title: _____

Address: _____

Telephone (Primary): _____ Telephone (Alternate): _____

Fax: _____ E-Mail Address: _____

Application is for: _____ New Generating Facility (40 – 5,000 kW)
 _____ Capacity addition to Existing Generating Facility
 _____ New Generating Facility (> 5,000 kW)

If capacity addition to existing facility, please describe (including a description of the existing net capability):

Will the Generating Facility be used for any of the following?

Net Metering? Yes ___ No ___

To Supply Power to the Interconnection Customer? Yes ___ No ___

To Supply Power to Others? Yes ___ No ___

Requested Point of Interconnection (GPS Coordinates):

Interconnection Customer's Requested In-Service Date: _____

For installations at locations with existing electric service to which the proposed Generating Facility will interconnect, provide:

_____ (Local Electric Service Provider*) _____ (Existing Account Number*)

[*To be provided by the Interconnection Customer if the local electric service provider is different from the Transmission Owner]

Contact Name: _____

Title: _____

Address: _____

Telephone (Primary): _____ Telephone (Alternate): _____

Fax: _____ E-Mail Address: _____

Generating Facility Information

Type of Generator: ____ Inverter ____ Synchronous ____ Induction

Generator Nameplate AC Rating: _____ kW

Generator Nameplate kVAR: _____ (leading/lagging)

Interconnection Customer or Customer-Site Load: _____ kW (if none, so state)

Typical Reactive Load (if known): _____

Maximum Physical Export Capability Requested: _____ kW

Total Number of Generators to be interconnected pursuant to this Interconnection

Request: Single phase ____ Three phase ____

Generating Facility Characteristic Data (for inverter-based machines)

Type: (Solar, Wind, Storage, Hydro, Biomass, etc.):

Inverter manufacturer and model: _____

AC and DC Nameplate Rating kW: _____

Max design fault contribution current: _____ Instantaneous ____ or RMS ____

Harmonics Contribution: _____

Generating Facility Characteristic Data (for rotating machines)

Generator Manufacturer, Model Name & Number: _____

RPM Frequency: _____

(*) Neutral Grounding Resistor (If Applicable): _____

Synchronous Generators:

Direct Axis Synchronous Reactance, X_d : _____ P.U.

Direct Axis Transient Reactance, X'_d : _____ P.U.

Direct Axis Subtransient Reactance, X''_d : _____ P.U.

Negative Sequence Reactance, X_2 : _____ P.U.

Zero Sequence Reactance, X_0 : _____ P.U.

KVA Base: _____

Field Volts: _____

Field Amperes: _____

Induction Generators:

Motoring Power (kW): _____

I_2^2 t or K (Heating Time Constant): _____

Rotor Resistance, Rr: _____

Stator Resistance, Rs: _____

Stator Reactance, Xs: _____

Rotor Reactance, Xr: _____

Magnetizing Reactance, Xm: _____

Short Circuit Reactance, Xd'': _____

Exciting Current: _____

Temperature Rise: _____

Frame Size: _____

Design Letter: _____

Reactive Power Required In Vars (No Load): _____

Reactive Power Required In Vars (Full Load): _____

Total Rotating Inertia, H: _____ Per Unit on kVA Base

Note: Please contact the Transmission Owner prior to submitting the Interconnection Request to determine if the specified information above is required.

Excitation and Governor System Data for Synchronous Generators Only

Provide appropriate IEEE model block diagram of excitation system, governor system and power system stabilizer (PSS) in accordance with the regional reliability council criteria. A PSS may be determined to be required by applicable studies. A copy of the manufacturer's block diagram may not be substituted.

Interconnection Facilities Information

Will a transformer be used between the generator and the point of common coupling?
 Yes No

Will the transformer be provided by the Interconnection Customer? Yes No

Transformer Data (If Applicable, for Interconnection Customer-Owned Transformer):

Is the transformer: Single phase Three phase Size: _____ kVA

Transformer Impedance: _____ % on _____ kVA Base

If Three Phase:

Transformer Primary: _____ Volts Delta Wye Wye Grounded

Transformer Secondary: _____ Volts Delta Wye Wye Grounded

Transformer Tertiary: _____ Volts Delta Wye Wye Grounded

Transformer Fuse Data (If Applicable, for Interconnection Customer-Owned Fuse):

Manufacturer: _____ Type: _____ Size: _____ Speed: _____

Interconnecting Circuit Breaker (if applicable):

Manufacturer: _____ Type: _____

Load Rating (Amps): _____ Interrupting Rating (Amps): _____

Trip Speed (Cycles): _____

Interconnection Protective Relays (If Applicable):

If Microprocessor-Controlled:

List of Functions and Adjustable Setpoints for the protective equipment or software:

Setpoint Function	Minimum	Maximum
1. _____	_____	_____
2. _____	_____	_____

If Discrete Components:

(Enclose Copy of any Proposed Time-Overcurrent Coordination Curves)

Manufacturer: _____ Type: _____ Style/Catalog No.: _____ Proposed Setting: _____

Manufacturer: _____ Type: _____ Style/Catalog No.: _____ Proposed Setting: _____

Current Transformer Data (If Applicable):

Manufacturer: _____ Type: _____ Accuracy Class: _____

Proposed Ratio Connection: _____

Potential Transformer Data (If Applicable):

Manufacturer: _____ Type: _____ Accuracy Class: _____

Proposed Ratio Connection: _____

General Information to include with application:

One-Line Diagram _____ Yes _____ No

Site Plan _____ Yes _____ No

System Protection and Control Scheme Documentation _____ Yes _____ No

Relay, Alarm, Control Schematics _____ Yes _____ No

Completed Power Systems Load Flow data sheet _____ Yes _____ No

List of adjustable set points for protective equipment or software _____ Yes _____ No

Transformer Fuse Manufacturer's TCC Curves _____ Yes _____ No

CT Manufacturer's Excitation and Ratio Correction Curves _____ Yes _____ No

Applicant Signature

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

Interconnection Customer: _____ Date: _____