

## **GENERATOR INTERCONNECTION APPLICATION**

For All Projects with Aggregate Generator Output 20 kW or Less Also Serves as Application for Category 1 Net Metering

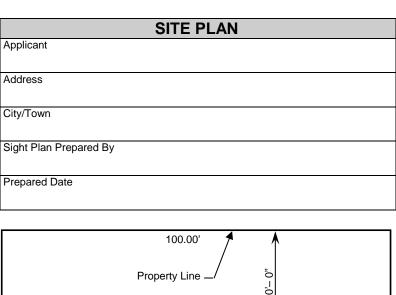
ELECTRIC UTILITY CONTACT INFORMATION		FOR OFFICE USE ONLY				
Consumers Energy Interconnection Coordinator		Application Number				
			Date and Time Application Received			
1945 West Parnall Road (Room P14-205) Jackson, MI 49201						
(517)788-1-						
Interconnection E-mail: customer_generation@cmsenergy.com						
CUSTOMER / ACCOUNT INFORMATION Electric Utility Customer Information (As shown on utility bill)						
Customer Name (Last, First, Middle)	•	Customer Mailir				
Customer Phone Number Customer E-ma		ail Address (Optional)				
( )						
Electric Service Account Number		Electric Service Meter Number				
Are You Applying for the Net Metering Program?  Are y		Are you interested in Selling Renewable Energy Credits (REC's)?				
Yes No		Yes N	No			
Will you have an Alternative Electric Supplier?						
Yes No If Yes, Name						
<b>Notes:</b> Enter name ONLY if your energy is supplied You must apply to both the Distribution Ut			applicable)	for Net Metering		
GE	NERATION SYSTE	M SITE INFO	RMATIO	N		
Physical Site Service Address (If Not Billing Addres	es)					
Annual Site Requirements Without Generation in Kilowatt Hours		Peak Annual Site Demand in Kilowatts (only for customers billed on Demand Rates)				
kWh/year		kW				
Attached Site Plan		Attached Electrical One-Line Drawing				
Page #		Page #				
GENERATION SYSTEM – MANUFACTURER INFORMATION						
System Type (Solar, Wind, Biomass, Fuel Cell, Geothermal, etc.)		Generator Type (Inverter, Induction, Synchronous)				
Total Generator(s) Nameplate DC Rating (Solar Only)		Total Generator Nameplate AC Rating				
kW		kW				
Generator AC Operating Voltage		Wiring Configuration (Single Phase, Three Phase)				
Certified Test Record No (Testing to Standard UL1	741 Scope 1.1a)					
INVERTER BASED SYSTEMS						
Manufacturer	Model (Name/Number)			ower Rating (kW)	Number of Inverters	
kW kW					kW	
INDUCTION AND SYNCHRONOUS BASED SYSTEMS  Manufactures  Madel Number						
Manufacturer	Model Name			Model Number		

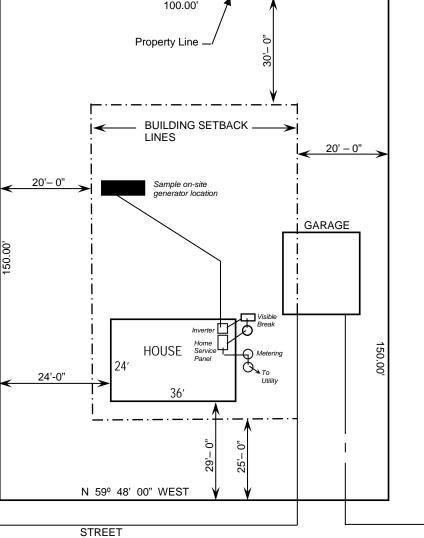
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INSTALLATION INFORMATION Project Single Point of Contact: (Electric Utility Customer, Developer or Other)					
Name	Company (If Applicable)	Phone Number			
E-mail Address		Requested In Service Date			
Licensed Contractor (Name of Firm or Self)					
Contractor Name (Last, First, MI)	Contractor Phone Number ( )	Contractor E-mail			
CUSTOMER AND CONTRACTOR SIGNATURES AND FEES					
<ul> <li>Attached \$75 Interconnection Application Fee OR</li> <li>Attached \$100 combined Interconnection and Net Metering Program Application Fees (Includes \$75 Interconnection Application fee along with \$25 Fee required if selecting Net Metering)</li> <li>□ Check # □ □ Money Order # □ □</li> <li>Sign and Return Completed Application with Application Fee to Electric Utility Contact</li> <li>To the best of my knowledge, all the information provided in this application form is complete and correct.</li> </ul>					
Customer Signature		Date			
Contractor Signature (if applicable)		Date			
Note: Refer to the applicable "Michigan Electric Utility Generator Interconnection Requirements" for a detailed explanation of the Interconnection Process and Technical Requirements.					

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## SAMPLE SITE PLAN - PROVIDED FOR REFERENCE ONLY





Weblink to State of Michigan / Plats:

http://www.cis.state.mi.us/platmaps/sr\_subs.asp

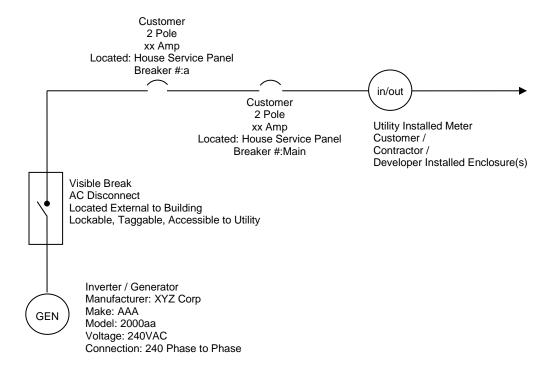
Note: Legible hand drawn site plans are acceptable.

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## SAMPLE ONE-LINE DRAWING

## **NET METERING CATEGORY 1 PROJECTS**

ONE-LINE DRAWING				
Customer Name	Licensed PE/Contractor (if applicable)			
Project Site Address	Electrical Contractor License Number			
Licensed PE/Contractor Signature	Date			



Note: Legible hand drawn one-line drawings are acceptable. It must be signed and sealed by a Licensed Professional Engineer, licensed in the State of Michigan or by an electrical contractor licensed by the State of Michigan.

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