Mayfield Electric & Water System

Application for Interconnection of Distributed Generation

This application is considered complete when it provides all applicable and correct information required below. Current Application Fee – up to 50kW - \$250.00, greater than 50 kW - \$500.00. Customer must also place a request for solar interconnection @ 270-247-4661.

CUSTOMER			
Name:			
	State:Zip:		
Telephone:		Email Address:	
Electric Service Account N	Number		
Owner of Building (if differ	rent than customer	·)	
CONTACT (IF DIFFEREI	NT THAN CUSTO	MER)	
Name:			
Address:			
			Zip:
Telephone:	Email Address:		
OWNER OF SYSTEM (IF Name:Address:		,	
			Zip:
Telephone:		Email Address:	
PROJECT DESIGN/ENG Company: Mailing Address:	,	•	
		State:	Zip Code:
· · · · · · · · · · · · · · · · · · ·		Representative:	
Email Address:			
PE License:		Stat	e:
ELECTRICAL CONTRAC	CTOR (AS APPLIC	CABLE)	
Company:			
Mailing Address:			
			Zip:
Phone Number:		Representative:	
Email Address:		Fax Number:	
Contractor's License #:		City/County/State:	

GENERATING FACILITY INFORMATION Location (if different from above): Distributor: _____Account Number: ____ _____Model:_____ Inverter Manufacturer: Nameplate Rating: (kW) (kVA) (AC Volts) # of Phases: Single Three # of Inverters in System: _____ System Design Capacity: _____(kW) ____(kVA) Battery Backup: □ Yes □ No If Yes - Manufacturer: _____Model: ____ Energy Source: ☐ Solar ☐ Wind ☐ Hydro ☐ Residential Battery ☐ Utility Scale Battery ☐ Utility Scale Fuel ☐ Gas ☐ Diesel ☐ Other (describe) Total Site Load_____(highest kW demand last 12 months) Residential _____Commercial _____Industrial Annual Estimated Generation (kWh) Estimated Installation Date: ______Estimated In-Service Date: _____

ADDITIONAL INFORMATION - SINGLE LINE DIAGRAM

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, batteries, number and location of PV panels, etc.), specifications, test reports, etc., and any other applicable drawings or documents necessary for the proper design of the interconnection. Provide a copy of the approved electrical inspection of the facility. Also describe the address or grid coordinates of the facility. The customer agrees to provide Mayfield Electric & Water System with any additional information required to complete the interconnection.

PERMISSION TO INTERCONNECT

Customer must not operate their generating facility in parallel with Mayfield Electric & Water System's distribution system until they receive written authorization for parallel operation from Mayfield Electric & and/or

Water. Unauthorized parallel operation property for which the customer may be	could result in injury to persons and/or damage to equipment e liable.			
INTERCONNECTION CUSTOMER SIGNATURE I hereby certify that, to the best of my knowledge, the information provided in this application is true				
Signed:				
Title:	Date:			
CONTACT FOR APPLICATION SUBI	MISSION AND FOR MORE INFORMATION:			
Mayfield Electric & Water System Conf	tact:			
itle: Electric Operations Manager				
Address: 301 East Broadway, Mayfield	I KY 42066			
Phone: 270-247-4661				
Email: cwoodward@mewsbb.com				