

MIDDLE TENNESSEE ELECTRIC  
MEMBERSHIP CORPORATION

## Application for Interconnection of Distributed Generation

This application is considered complete when it provides all applicable and correct information required below.

### COOPERATIVE MEMBER

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone (Day): \_\_\_\_\_ (Evening): \_\_\_\_\_  
Fax: \_\_\_\_\_ Email Address: \_\_\_\_\_  
Electric Service Account Number \_\_\_\_\_  
Owner of Building (if different than customer) \_\_\_\_\_

### OWNER OF SYSTEM (IF DIFFERENT THAN MEMBER)

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone (Day): \_\_\_\_\_ (Evening): \_\_\_\_\_  
Fax: \_\_\_\_\_ Email Address: \_\_\_\_\_

### NABCEP INSTALLER

Company: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Representative: \_\_\_\_\_  
Email Address: \_\_\_\_\_ Fax Number: \_\_\_\_\_  
Contractor's License #: \_\_\_\_\_ City/County/State: \_\_\_\_\_  
NABCEP CERTIFICATION # \_\_\_\_\_

### ELECTRICAL CONTRACTOR (If Applicable)

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone (Day): \_\_\_\_\_ (Evening): \_\_\_\_\_  
Fax: \_\_\_\_\_ Email Address: \_\_\_\_\_

**GENERATING FACILITY INFORMATION**

Location (if different from above): \_\_\_\_\_

Distributor: \_\_\_\_\_ Account Number: \_\_\_\_\_

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

Nameplate Rating: \_\_\_\_\_ (kW) \_\_\_\_\_ (kVA) \_\_\_\_\_ (AC Volts)

Single Phase: \_\_\_\_\_ Three Phase: \_\_\_\_\_

System Design Capacity: \_\_\_\_\_ (kW) \_\_\_\_\_ (kVA)

Energy Source:  Solar  Wind  Hydro  Other (describe) \_\_\_\_\_

Is this Behind the Meter or sell excess to TVA through DPP Program: \_\_\_\_\_

Attach support information to show testing and listing by a Nationally Recognized Laboratory for compliance with the codes and standards outlined in 1.4.1 – 1.4.4 for the proposed system.

Estimated Installation Date: \_\_\_\_\_ Estimated In-Service Date: \_\_\_\_\_

List components of the Small Generating Facility equipment package that are currently certified:

Equipment Type	Certifying Entity
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____

**ADDITIONAL INFORMATION – SINGLE LINE DIAGRAM**

Please attach a detailed one-line diagram of the proposed facility, inverter and solar panel specifications, photo or sketch of the proposed layout of the renewable equipment in relation to the existing electric service. In addition, please include any other major equipment (generators, transformers, circuit breakers, protective relays, batteries, number and location of PV panels, etc.), and any other applicable drawings or documents necessary for the proper design of the interconnection.

MTEMC  
Tim Suddoth, Distributed Energy Resources Coordinator  
555 New Salem Rd.  
Murfreesboro, TN 37129

**PERMISSION TO INTERCONNECT**

Customer must not operate their generating facility in parallel with Distributor’s system until they receive written authorization for parallel operation from Distributor. Unauthorized parallel operation could result in injury to persons and/or damage to equipment and/or property for which the customer may be 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: \_\_\_\_\_