SMALL GENERATOR INTERCONNECTION REQUEST
(Application Form)

Transmission Provider: AVISTA CORPORATION

Designated Contact Person: Randy Gnaedinger
Address: 1411 E. Mission
Spokane WA 99202-1902

Telephone Number: (509) 495-2047
FAX: (509) 495-5997
Email Address: randy.gnaedinger@avistacorp.com

An Interconnection Request is considered complete when it provides all applicable and correct information required below. Per SGIP section 1.5, documentation of site control must be submitted with the Interconnection Request.

Preamble and Instructions

An Interconnection Customer who requests a Federal Energy Regulatory Commission jurisdictional interconnection must submit this Interconnection Request by hand delivery, mail, e-mail, or fax to the Transmission Provider.

Processing Fee or Deposit:

If the Interconnection Request is submitted under the Fast Track Process, the non-refundable processing fee is $500.

If the Interconnection Request is submitted under the Study Process, whether a new submission or an Interconnection Request that did not pass the Fast Track Process, the Interconnection Customer shall submit to the Transmission Provider a deposit not to exceed $1,000 towards the cost of the feasibility study.

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 (Day): ___________________ Telephone (Evening): ____________
Fax: ___________________________ E-Mail Address: ___________________________

Alternative Contact Information (if different from the Interconnection Customer)

Contact Name: _____________________________________________________________
Title: ___________________________________________________________________
Address: ___________________________________________________________________

Telephone (Day): __________________ Telephone (Evening): _____________________
Fax: ___________________________ E-Mail Address: ___________________________

Application is for: _____New Small Generating Facility
____Capacity addition to Existing Small Generating Facility

If capacity addition to existing facility, please describe: ____________________________

Will the Small 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 ____

For installations at locations with existing electric service to which the proposed Small 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 Provider]

Contact Name: _____________________________________________________________
Title: ___________________________________________________________________
Address: ___________________________________________________________________

Telephone (Day): __________________ Telephone (Evening): _____________________
Fax: ___________________________ E-Mail Address: ___________________________

Requested Point of Interconnection: ___________________________________________
Interconnection Customer's Requested In-Service Date: ________________________________

**Small Generating Facility Information**
Data apply only to the Small Generating Facility, not the Interconnection Facilities.

Energy Source: ___ Solar ___ Wind ___ Hydro ___ Hydro Type (e.g. Run-of-River): _____________
___ Diesel ___ Natural Gas ___ Fuel Oil ___ Other (state type) ________________________________

Prime Mover: ___Fuel Cell ___Recip Engine ___Gas Turb ___Steam Turb ___Microturbine ___PV ___Other

Type of Generator: ____Synchronous ____Induction ____ Inverter

Generator Nameplate Rating: _______kW (Typical) Generator Nameplate kVAR: ________

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

Typical Reactive Load (if known): ___________________________

Maximum Physical Export Capability Requested: ___________ kW

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

<table>
<thead>
<tr>
<th>Equipment Type</th>
<th>Certifying Entity</th>
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Is the prime mover compatible with the certified protective relay package? ____Yes ____No

Generator (or solar collector)
Manufacturer, Model Name & Number: ________________________________
Version Number: ________________________________

Nameplate Output Power Rating in kW: (Summer) ___________ (Winter) ___________
Nameplate Output Power Rating in kVA: (Summer) ___________ (Winter) ___________

Individual Generator Power Factor
Rated Power Factor: Leading: ___________ Lagging: ___________

Total Number of Generators in wind farm to be interconnected pursuant to this Interconnection Request: __________ Elevation: _______ __Single phase ___Three phase

Inverter Manufacturer, Model Name & Number (if used): ________________________________

List of adjustable set points for the protective equipment or software: ________________________________

Note: A completed Power Systems Load Flow data sheet must be supplied with the Interconnection Request.
Small Generating Facility Characteristic Data (for inverter-based machines)

Max design fault contribution current: _________    Instantaneous __ or RMS? _________

Harmonics Characteristics: _________________________________

Start-up requirements: _________________________________

Small Generating Facility Characteristic Data (for rotating machines)

RPM Frequency: ____________
(*) Neutral Grounding Resistor (If Applicable): ___________

Synchronous Generators:

Direct Axis Synchronous Reactance, Xd: _______ P.U.
Direct Axis Transient Reactance, X'd: ___________ P.U.
Direct Axis Subtransient Reactance, X"d: ___________ P.U.
Negative Sequence Reactance, X2: ___________ P.U.
Zero Sequence Reactance, X0: ___________ P.U.
KVA Base: __________________________
Field Volts: ______________
Field Amperes: ______________

Induction Generators:

Motoring Power (kW): ____________
I2t 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 Provider 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):

(Attach copy of fuse manufacturer's Minimum Melt and Total Clearing Time-Current Curves)

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:

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<th>Setpoint Function</th>
<th>Minimum</th>
<th>Maximum</th>
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If Discrete Components:

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

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<tr>
<th>Manufacturer</th>
<th>Type</th>
<th>Style/Catalog No.</th>
<th>Proposed Setting</th>
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Current Transformer Data (If Applicable):

(Enclose Copy of Manufacturer's Excitation and Ratio Correction Curves)

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<th>Manufacturer</th>
<th>Type</th>
<th>Accuracy Class</th>
<th>Proposed Ratio Connection</th>
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Potential Transformer Data (If Applicable):

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<th>Type</th>
<th>Accuracy Class</th>
<th>Proposed Ratio Connection</th>
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**General Information**

Enclose copy of site electrical one-line diagram showing the configuration of all Small Generating Facility equipment, current and potential circuits, and protection and control schemes. This one-line diagram must be signed and stamped by a licensed Professional Engineer if the Small Generating Facility is larger than 50 kW. Is One-Line Diagram Enclosed? ____Yes ____No

Enclose copy of any site documentation that indicates the precise physical location of the proposed Small Generating Facility (e.g., USGS topographic map or other diagram or documentation).

Proposed location of protective interface equipment on property (include address if different from the Interconnection Customer's address) ________________________________________________________________

Enclose copy of any site documentation that describes and details the operation of the protection and control schemes. Is Available Documentation Enclosed? ___Yes ____No

Enclose copies of schematic drawings for all protection and control circuits, relay current circuits, relay potential circuits, and alarm/monitoring circuits (if applicable). Are Schematic Drawings Enclosed? ___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.

For Interconnection Customer: _____________________________ Date: ____________