

# GENERATOR INTERCONNECTION APPLICATION

AGGREGATE GENERATOR OUTPUT MORE THAN 550 kW TO LESS THAN 2 MW

Category 4

## Electric Utility Contact Information

Alpena Power Company  
Jason Repke, Interconnection Coordinator  
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For Office use only

Application Number: \_\_\_\_\_

Application Date: \_\_\_\_\_

Application Time Received: \_\_\_\_\_

## Customer / Account Information

### Electric Utility Customer Information: (As shown on utility bill)

Customer Name (Last, First, Middle): \_\_\_\_\_

Customer Mailing Address: \_\_\_\_\_

Customer Phone Number: \_\_\_\_\_

Customer E-mail Address (Optional) \_\_\_\_\_

Electric Service Account Number: \_\_\_\_\_

Electric Service Meter Number: \_\_\_\_\_

## Generation System Site Information

Physical Site Service Address (if not Billing Address): \_\_\_\_\_

Annual Site Requirements Without Generation, in kWhs or mWhs: \_\_\_\_\_ kWh/year or mWh/year

Peak Annual Site Demand in Kw or Mw (only for customers billed on demand rates): \_\_\_\_\_ kW or mW

Site Plan Attached: \_\_\_\_ Yes

Electrical One-Line Drawing Attached: \_\_\_\_ Yes

## Generation System – Manufacturer Information

System Type (Solar, Wind, Biomass, Fuel Cell, Geothermal, etc): \_\_\_\_\_

Generator Type (Inverter, Induction, Synchronous): \_\_\_\_\_

Generator Nameplate Rating: \_\_\_\_\_ kW or mW

Expected Annual Output in Kilowatthours or megawatthours: \_\_\_\_\_ kWh/year or mWh/yr

A.C. Operating Voltage: \_\_\_\_\_

Wiring Configuration (Single Phase, Three Phase): \_\_\_\_\_

Certified Test Record No. (Testing to standard UL 1741 scope 1.1a): \_\_\_\_\_

### **Inverter Based Systems**

Manufacturer: \_\_\_\_\_

Model (Name/Number): \_\_\_\_\_

Inverter Power Rating(kW or mW): \_\_\_\_\_

### **Induction & Synchronous Based Systems**

Manufacturer: \_\_\_\_\_

Model (Name/Number): \_\_\_\_\_

## **Installation Information**

Project Single Point of Contact: (Electric Utility Customer, Developer, Electrician, Vendor, or other)

Name: \_\_\_\_\_

Company (If Applicable): \_\_\_\_\_

Phone Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Requested In Service Date: \_\_\_\_\_

Installation Contractor (If not Self): \_\_\_\_\_

Contractor Contact Name: \_\_\_\_\_

Contractor Phone Number: \_\_\_\_\_

Contractor E-Mail: \_\_\_\_\_

## **Customer and Contractor Signature and Fees**

\_\_\_ Attached \$ 250 Interconnection Application Fee    Check # \_\_\_\_\_

(Sign and Return completed application with Application Fee to Electric Utility Interconnection Coordinator)

To the best of my knowledge, all the information provided in this Application Form is complete and correct.

\_\_\_\_\_

Customer Signature

\_\_\_\_\_

Contractor Signature (if applicable)

Note: Refer to the applicable "Michigan Electric Utility Generator Interconnection Requirements" for a detailed explanation of the Interconnection Process and Technical Requirements.