

**APPLICATION FOR INTERCONNECTION  
AND PARALLEL OPERATION WITH THE  
MIDWEST ELECTRIC DISTRIBUTION SYSTEM**

Return Completed Application to: Midwest Electric Inc c/o Paul Rogers  
P.O. Box 10  
St. Marys, OH 45885

Customer's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Service Point Address: \_\_\_\_\_

Information Prepared and Submitted By: \_\_\_\_\_  
(Name and Address) \_\_\_\_\_

The following information shall be supplied by the Customer or Customer's designated representative. All applicable items must be accurately completed in order that the Customer's generating facilities may be effectively evaluated for interconnection with the Cooperative's Distribution System.

**GENERATOR**

Number of Units: \_\_\_\_\_

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

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

Fuel Source Type (Solar, Natural Gas, Wind, etc.): \_\_\_\_\_

Kilowatt Rating (95 F at location) \_\_\_\_\_

Kilovolt-Ampere Rating (95 F at location): \_\_\_\_\_

Power Factor: \_\_\_\_\_

Voltage Rating: \_\_\_\_\_

Ampere Rating: \_\_\_\_\_

Number of Phases: \_\_\_\_\_

Frequency: \_\_\_\_\_

Do you plan to export power: \_\_\_\_\_ Yes \_\_\_\_\_ No

If Yes, maximum amount expected: \_\_\_\_\_

If Yes, do you expect the amount of exported energy to exceed your requirements for electric energy at the service address on an annual basis? \_\_\_\_\_ Yes \_\_\_\_\_ No

Estimated annual requirements for electric energy at the service address: \_\_\_\_\_ Kilowatt-hours

Expected Energizing and Start-up Date \_\_\_\_\_

Normal Operation of Interconnection: (examples: provide power to meet base load, demand management, standby, back-up, other) (please describe) \_\_\_\_\_

One-line diagram attached: \_\_\_\_\_ Yes

Have testing results been supplied to the Cooperative documenting conformance with the Cooperative's technical requirements: \_\_\_\_\_ Yes [Note: Requires a Yes for complete Application.]

Have all necessary government permits and approvals been obtained for the project prior to this application: \_\_\_\_\_ Yes [Note: Requires a Yes for an Application to be considered complete.]

Has the generator been certified as a qualifying cogeneration or small power production facility under the Public Utility Regulatory Policies Act of 1978: \_\_\_\_\_ Yes

Have the generator manufacturer machine characteristics been supplied to the Company:

\_\_\_\_\_ Yes [Note: Requires a Yes for complete Application.]

Layout sketch showing lockable, "visible" disconnect device: \_\_\_\_\_ Yes

Application fee: \_\_\_\_\_ Yes \$250.00

Checks are payable to  
Midwest Electric, Inc.  
P.O. Box 10  
St. Marys, Ohio 45885

**Customer Name:** \_\_\_\_\_

**Authorized Representative's Signature:** \_\_\_\_\_

**Title:** \_\_\_\_\_ **Date:** \_\_\_\_\_