## **APPLICATION FOR DISTRIBUTED RESOURCE**

Return Completed Application to:

Midwest Electric, Inc.

Attn: Joel Johns
06029 County Road 33

06029 County Road 33A 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:
Fraguency:

Do you plan to interconnect the generator a distribution facilities?:	-	-		operative's	electric
If Yes, do you plan to export power?:		Yes	N	0	
If Yes, maximum amount expected:					
If Yes, do you expect the amount of exporte energy at the service address on an annual be					ectric
Estimated annual requirements for electric	energy at the	he service add	lress:	Kilowa	tt-hours
Do you plan to use the output of the facility	y to serve y	our electric lo	ad?	Yes	No
Do you plan to retain, or sell to the Cooperattributes (i.e. renewable energy credits)? _				environmer	ıtal
Expected Energizing and Start-up Date					
Normal Operation: (examples: provide pov	wer to meet	t base load, de	emand		
management, standby, back-up, other) (plea	ase describ	e)			
One-line diagram attached: Yes					
Have testing results been supplied to the Co Cooperative's technical requirements: Application.]					
Have all necessary government permits and application: Yes [Note: Require complete.]					to this
Has the generator been certified as a qualify under the Public Utility Regulatory Policies be certified as a qualifying cogeneration or	s Act of 19	78:	_ Yes [No	te: Genera	tor must
Have the generator manufacturer machine of	characterist	tics been supp	lied to the	Company:	
Yes [Note: Requires a Yes for cor	mplete App	olication.]			
Layout sketch showing lockable, "visible"	disconnect	device:	Yes		

Application fee: \$250.00

Midwest Electric, Inc. at 06	029 County Road 33A, St. Marys, OH 45885
DATE:	Customer Name:
	By:
	(Signature)
	Name:
	Title:

Checks are payable to