

**Simplified Interconnection Application
Certified Inverter-Based Generating Facilities
With a Rated Capacity up to and including 10kW AC**

The undersigned (applicant) being an individual a married couple a sole proprietorship a _____ partnership organized under the laws of the State of _____ and consisting of the persons and entities the names and principal addresses of whom appear on an attachment hereto, a _____ corporation (company) organized under the laws of the State of _____ and the names and principal addresses of the statutory agent for and the officers of which appear on the attachment hereto, hereby certifies that Applicant owns or will own operates owns and operates or will own or operate a cogeneration facility small power production facility which meets the criteria for qualification contained in 18 C.F.R. Section 292.203 (Qualifying Facility or QF).

Processing Fee: A Fee of \$50 must accompany this Application

(1.) Interconnection Customer

Name: _____

Mailing Address: _____

Street Address: _____

City, State, Zip Code: _____

Telephone Number: _____

Facsimile: _____

e-mail: _____

Contact (if different from Interconnection Customer)

Name: _____

Mailing Address: _____

Street Address: _____

City, State, Zip Code: _____

Telephone Number: _____

Facsimile: _____

e-mail: _____

(2.) Detailed Description of QF

(with attachments if necessary)

(3.) The design capacity of the QF is _____ kW.

(4.) The QF when constructed and operated, will meet the requirements of the National Electrical code, National Electrical Safety Code, Institute of Electrical and Electronic Engineers, Underwriters Laboratories and any other applicable safety and implementing standards established by local and national governmental entities and organizations. The QF will meet or exceed the standards set forth in section 10 of the Tariff except: _____.

(5.) Generating Facility Information:

Location (if different from above): _____

Account Number: _____

Generator kW Inverter Process: _____

Inverter Manufacturer: _____ Model

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

Single Phase _____ Three Phase _____

System Design Capacity: _____ (kW) _____ (kVA)

Prime Mover: (circle one)

Photovoltaic Reciprocating Engine Fuel Cell Turbine Other (describe)

Energy Source: (circle those that apply)

Solar Wind Hydro Diesel Natural Gas Fuel Oil Other (describe)

Is the equipment uL1741 Listed? Yes _____ No _____

If Yes, attach manufacturer's cut-sheet showing UL1741 listing

Estimated Installation Date: _____

Estimated In-Service Date _____

The 10kW Inverter Process is available only for inverter-based Generating Facilities no larger than 10kW that meet the codes, standards, and certification requirements of Attachment 3 of the Generator Interconnection Procedures (SGIP), or the QRU has reviewed the design or tested the proposed Generating Facility and is satisfied that it is safe to operate.

(6.) The specifications and drawings of the QF attached hereto are accurate and will, when the QF is constructed and operated, be accurate and correct.

(7.) The point of interconnection will be: _____

(8.) The map attached hereto is of suitable scale to show the exact location of a clearly labeled, securable load break disconnect switch is in a visible outside, readily accessible location, which will be operated and maintained by the Applicant in accordance with applicable requirements, including ingress and egress to the Cooperative (and/or its wholesale supplier) being provided at all times by Applicant.

(9.) Description of necessary rights-of-way and easements for Cooperative to access the QF:

(10.) The date of expected completion of the QF is _____, 20__

(11.) The licensed professional electrical engineer who will certify that the design of the QF and its interconnecting equipment comply with utility requirements and with reasonable interconnection safety and design standards and prudent electrical practices is as follows:

Name of firm: _____

Contact Person: _____

Address: _____

City, State, Zip Code: _____

Telephone Number: _____ Fax Number _____

E-Mail Address: _____

Columbus Electric Cooperative [] may [] may not communicate with _____
_____ such engineer independent of communicating with
Applicant's representative identified above.

(12.) The metering option preferred is _____

(13.) Applicant desires Cooperative to provide supplemental, back-up, maintenance and/or interruptible power in accordance with NMPRC Rule 570 and Cooperative's applicable Tariff.

(14.) If Applicant plans a QF with a design capacity of 25 kW or less, applicant, does does not desire to negotiate a contract different than that prescribed by NMPRC Rule 570.79b) and, if so, in what respect: _____

(15.) The manner by which interconnection costs will be paid is: _____

(16.) Applicant will will not procure and maintain the insurance recommended by NMPRC Rule 570.7(f). If so, the carrier will be: _____

(17.) Applicant, if qualified in accordance with Cooperative's articles of incorporation and bylaws, desires to apply not apply for membership and if Applicant becomes a member, or agrees to abide by and comply with Cooperative's bylaws (a copy of which is available from the Cooperative) and other lawful requirement applying to its members.

Applicant _____

Dated _____, 20____