

APPLICATION TO INTERCONNECT SMALL GENERATION 100 kW OR LESS (SC)

Complete and sign the application below and submit with your application fee to:

Duke Energy Corporation
Customer Prototype Lab
Mail Code: EY500
139 East Fourth Street
PO Box 960
Cincinnati, OH 45202

Application fee:

Residential customers: \$100.00

Non-residential customers \$250.00

Make checks payable to ***Duke Energy Carolinas.***

Please contact the Customer Prototype Lab if you have any questions regarding the interconnection process.

Customer Prototype Lab
Phone: (866) 233-2290
Fax: (513) 287-2718

Email: customerownedgeneration@duke-energy.com

Insurance Information

Paragraph 4.9 of the Interconnection Standard requires customers to obtain and retain, for as long as its Generator is interconnected with the Company's system, liability insurance which protects the Customer from claims for bodily injury and/or property damage. For a non-residential Customer the minimum coverage shall be comprehensive general liability insurance with coverage at least \$300,000 per occurrence and for a residential Customer the minimum coverage shall be at a standard homeowner's insurance policy with liability coverage in the amount of at least \$100,000 per occurrence. This insurance shall be primary for all purposes. The Customer shall provide certificates evidencing this coverage as required by the Company. The Company reserves the right to refuse to establish, or continue the interconnection of the Customer's Generator with the Company's system, if such insurance is not in effect.

Please request an insurance certificate from your insurance company demonstrating proper coverage and forward with your application.

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Customer hereby gives notice of intent to operate an interconnected generating facility pursuant to the "Standard for Interconnecting Small Generation 100 kW or less with Electric Power Systems (Interconnection Standard)". Permission to interconnect is not granted until an Interconnection Agreement has been completed between the Company and the Customer.

Section 1. Contact Information

Customer (Name): _____ E-Mail Address: _____

US Mail Address: _____

City: _____ State: _____ Zip Code: _____ County: _____

Daytime Phone Number: _____ Alternate Phone / Cell Number _____

Installer (Name): _____ Date: _____ Phone Number: _____

US Mail Address: _____ City: _____ State: _____ Zip Code: _____

Company: _____ Electrical / Contractor license number(s) _____

Electrical Inspector (Name): _____ County: _____ Phone: _____

Section 2. Generator and Facility Information

Facility Location (if different from above): _____

Electric Utility Name: _____ Account Number: _____

Customer Type: Residential , Commercial , Other _____

Is there an existing interconnected generator at this facility? Yes , No

Total proposed aggregate generation output rating at this site (kW): _____

Generator / Inverter	# 1	# 2	# 3
Energy Source / Type	_____	_____	_____
Manufacturer Name	_____	_____	_____
Model Name & # (Specific)	_____	_____	_____
Nameplate Rating (kW AC)	_____	_____	_____
Nominal Voltage (Volts AC)	_____	_____	_____

(Note: If more than 3 Generators / Inverters will be used, complete a separate attachment with the information above)

If a customer owned transformer will be used, specify Mfg, type and ratings: _____
(Attach Transformer Manufacturer Specifications)

Section 3. Installation Information

Proposed Installation Date: _____ Proposed Interconnection Date: _____

Section 4. Certification

The interconnection protection system is tested and listed for compliance with the latest published edition of Underwriters Laboratories (UL) 1741 including the anti-islanding test. The system (is / will) be installed in compliance with IEEE 929 and or IEEE 1547 as applicable, all manufacturer specifications, the National Electric Code and all local codes. No protection settings affecting anti-islanding have been or will be adjusted or modified.

I hereby certify that, to the best of my knowledge, all of the information provided in this Application is true and correct and the generator will comply with the Interconnection Standard stated above.

Signature of Customer _____ Date: _____

Note: Attach application fee and 1-line (electrical drawing of installation) with application.

Submit Application to: (Utility Representative) _____

Company (Electric Utility Use only): Note: Only signifies receipt of this form.

This application received by Duke Energy Carolinas, LLC

Signed (Utility Representative): _____ Date: _____