LEVELS 2-4 INTERCONNECTION REQUEST APPLICATION FORM (For Distributed Generation Facilities 10 MVA or Less)

INSTRUCTIONS:

- 1. *Indicates required information.
- 2. Mail completed form with application fee (see page 2) to your utility

INTERCONNECTION CUSTOMER CONTACT INFORMATION												
*Owner/Company (Legal Entity Name)						*Con	tact Name					
											T	
*Mailing Address						*City				*State	*Zip	
*Phone No. <i>(Daytime</i>	,)	Phone No. ((Evenina)	Fac	simile No.		*Em	ail Address				
Filone No. (Dayume)	,	FIIONE NO. (Lveriirig)	l ac	Silline NO.		LIII	ali Audiess				
ALTERNATE CONTACT INFORMATION (% "%)												
ALTERNATE CONTACT INFORMATION (if different from Customer Contact Information) Owner / Company (Legal Entity Name) Contact Name												
Owner / Company (Legal Entity Maine)												
Mailing Address						City	State Zip					
· ·												
Phone No. (Daytime)	one No. (Daytime) Phone No. (Evening) Facsimile No.						Email Address					
		FACILITY L	OCATIO)N (<i>ii</i>		t from Cus	stome	r Contact				
*Facility Address or L	atitude an	d Longitude			*City					*State	*Zip	
*Utility Serving Facilit	v Site		Account	No of	 f Facility Si	te <i>(existing u</i>	ıtility cı	ıstomers)	*Meter N	o. <i>(existing utili</i>	tv customers)	
cumy corring acim	, 5.1.5		710000.11			10 (07011.19 0		.0.0		o. (omeung aun	y caciemers,	
				EQL	JIPMENT	CONTRA	СТО	R				
*Name							*Con	tact Name				
*Mailing Address						*City	*State *Zip					
							*Email Address					
*Phone No. (Daytime))	Phone No. (Evening)	Fac	simile No.		*Em	ail Address				
									_			
ELECTRICAL CONTRACTOR (if different from Equipment Contractor)												
Name							Conta	act Name				
MASTER Address						City				Ctata	7:	
Mailing Address						City				State	Zip	
Phone No. (Daytime) Phone No. (Evening) Facsimile No.					simile No.		T*Em	ail Address				
Those No. (Evolung)												
License No. (if applicable)						Active Lice	Active License? (if applicable)					
						YES						
ELECTRIC SERVICE INFORMATION FOR CUSTOMER FACILITY WHERE GENERATOR WILL BE INTERCONNECTED												
			1	NER			ITER	CONNEC	TED			
*Existing Capacity (Service Entrance) *Proposed Capacity (Service Entrance)						Service Phase ☐ Three Phase						
(Amps) (Amps) (Volts) Breaker - Existing Panel Line Side Tap with Fuse Inside Sealed Enclosur								Sealed Enclosure				
If 3 Phase Transformer, indicate type: Transformer Impedance												
Primary Winding Wye Delta Secondary Winding					Wye	;	Delta	s	ize			
*Does this application require a group interconnection study?												
*Is this project an expansion of a current distributed generation facility?												

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APPLICANT OWNERSHIP INTEREST (check or	ne)						
Owner Lease 3 rd Party PPA Tenant Other (Please explain)							
*INTENT OF GENERATION (check one)							
Offset Load (Unit will operate in parallel and may export without net metering or without selling excess power and energy pursuant to Iowa Utilities Board rule 199 IAC 15.5 and the utility's tariff).							
Net Metering (Unit will operate in parallel and will export power to utility pursuant to lowa Utilities Board rule 199 IAC 15.11(5) and the utility's net metering, net billing, or inflow/outflow tariff).							
Self-Use and Sales to the Utility (Unit will operate in parallel and may export and sell Utilities Board rule 199 IAC 15.5 and the utility's tariff).	excess power to utility pursuant to lowa						
Wholesale Market Transaction (Unit will operate in parallel and participate in MISO (Midwest Independent System Operators) or other wholesale power markets pursuant to separate requirements and agreements with MISO or other transmission providers, and applicable rules of the Federal Energy Regulatory Commission).							
Back-Up Generation (Units that temporarily operate in parallel with the electric distrib milliseconds. Units that temporarily operate in parallel with the electric distribution systomatical outside the scope of Chapter 45 Interconnection. Contact the utility for applicable into	stem for 100 milliseconds or less are						
NOTE: Back-up units that do not operate in parallel for more than 100 milliseconds do not need	an interconnection agreement.						
*REQUESTED PROCEDURE UNDER WHICH TO EVALUATE INTERCONNE	CTION REQUEST (check one)						
Please indicate below which review procedure applies to the interconnection request. The review by the utility.	w procedure used is subject to confirmation						
Level 2 - Lab-certified interconnection equipment with an aggregate electric nameplate capacity less than or equal to 2 MVA for non-inverter based systems or inverter-based systems as defined in 199 IAC 45.8(2)(b). Lab-certified is defined in lowa Utilities Board chapter 45 rules on Electric Interconnection of Distributed Generation Facilities (199 IAC 45.1). (Application fee is \$250 plus \$1.00 per kVA. If the utility performs a Witness Test as specified in 199 IAC 45.5(10), the utility may charge the interconnected customer an additional cost-based fee of no more than \$125.)							
Level 3 - Distributed generation facility does not export power. Nameplate capacity rating is less than or equal to 50 kVA if connecting to area network or less than or equal to 10 MVA if connecting to a radial distribution feeder. (Application fee amount is \$500 plus \$2.00 per kVA)							
Level 4 - Nameplate capacity rating is less than or equal to 10 MVA and the distributed generation facility does not qualify for a Level 1, Level 2, or Level 3 review, or the distributed generation facility has been reviewed but not approved under a Level 1, Level 2, or Level 3 review. (Application fee amount is \$1,000 plus \$2.00 per kVA, to be applied toward any subsequent studies related to this application.)							
NOTE: Descriptions for interconnection review categories do not list all criteria that must be satisfied. For a complete list of criteria, please refer to Iowa Utilities Board chapter 45 rules on Electric Interconnection of Distributed Generation Facilities (199 IAC 45).							
*DISTRIBUTED GENERATION FACILITY INFORMATION							
Commissioning Test Date (If the Commissioning Test Date changes/unknown, the interconnection customer must inform the utility as soon as aware of the changed/known date, but no later than 15 business days.)							
*List interconnection components/systems to be used in the distributed generation facility that are	e lab-certified.						
*Component/System NRTL Providing Label and Listing							

YES

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Copies of manufacturer brochures and/or technical specifications included.

*DISTRIBUTED GENERATION FACILITY INFORMATION											
*Energy Source/Converter Wind Turbine Solar Photovoltaic Cell Biomass Hydro Diesel Engine Natural Gas Fuel Oil Storage - Specify type Other											
	*IN	FORMAT	ION F	OR INVER	TER-BASE) FA	CILITIE	ES .			
Inverter Information (Att	*INFORMATION FOR INVERTER-BASED FACILITIES Inverter Information (Attach manufacturer's technical specifications and label information from a nationally recognized testing laboratory, e.g. UL.)										
Manufacturer	Quantity	Invert	er UL1741			ted Output Number of		Power Factor	Efficiency		
Model		Listed Yes [kW _{AC} Volts _A			Phase ☐ 1 ☐ 3	%	%		
Manufacturer	Quantity	Quantity Inverter U Listed		Continuous Rated Output		Output	Number of Phase	Power Factor	Efficiency		
Model				es 🗌 No	kW _{AC} Volts _{AC}			1 3	%	%	
			*DC	Source/Pi	rime Mover						
Solar Module #1 Manufacturer							Quantity	у	Power Rating		
Model									Watts _{DC}		
Solar Module #2 Manufacturer							Quantity	y	Power Rating		
Model									Watts _{DC}		
			*Sol	ar Module	Orientation						
Type ☐ Fixed ☐ Single Axis ☐	Tilt (degrees)		Azimuth (1	(Solar Module #1 Quantity		Solar Module #2 Quantity			
Type ☐ Fixed ☐ Single Axis ☐	Tilt (degre	ees)	Azimuth (1	nam (100 coam)		Solar Module #1 Quantity		Solar Module #2 Quantity			
Type ☐ Fixed ☐ Single Axis ☐	Tilt (degrees) Azimuth (180° = south)			80° = south)		olar Module #1 Solar M			2		
Туре	Tilt (degre	ees)	Azimuth (1	(Solar Module #1 Quantity		Solar Module #2 Quantity			
☐ Fixed ☐ Single Axis ☐	J Duai Axis	Quantity						Quantity			
*Inverter/Solar Module Combinations (Use a separate row for each unique combination of Inverter and Solar Modules)											
Inverter Information (Att	ach manufacture	r's technical	specific					•	•	,	
Inverter Type: Quantity: Solar Module # □ String □ Microinverter Quantity		1 Solar Module # Quantity		T	kW _{DC} Connected to each inverter: kW _{DC}			ous Rated f each inverter: kW _{AC}	Inverter is DC I (kW _{DC} < kW _{AC})	_imited Yes □ No	
Inverter Type: Quantity: ☐ String ☐ Microinverter	Solar N Quanti	/lodule #	·- 1 .	kW _{DC} Connected to each inverter:			ous Rated f each inverter: kW _{AC}	Inverter is DC I (kW _{DC} < kW _{AC})			
Inverter Type: Quantity: ☐ String ☐ Microinverter	Solar Module #1 Solar Module # Quantity Quantity		· — .	kW _{DC} Connected to each			ous Rated f each inverter: kWac	Inverter is DC I (kW _{DC} < kW _{AC})			
Inverter Type: Quantity: Solar Module #1 String Microinverter Quantity			Solar Module #2 Quantity		1111 0 . 1. 1		Output of each inverter:		Inverter is DC I (kW _{DC} < kW _{AC})		
**						. .					
	pate kW _{AC} Por	•			_				acility	kWac	
Aggregate kW _{AC} power output of <u>first</u> inverter/solar module combination listed above (Quantity of inverters multiplied by either the Continuous Rated Output of each inverter (not DC limited) <u>OR</u> kW _{DC} Connected to each inverter (DC Limited) Aggregate kW _{AC} power output of <u>second</u> inverter/solar module combination listed above (Quantity of inverters multiplied by							ed)	kWac			
either the Continuous Rated Ou	utput of each inve	erter (not DC	limited)	OR kWDC C	onnected to each	ch inv	erter (DC	Limited)			
Aggregate kW _{AC} power output of either the Continuous Rated Out										kW _{AC}	
Aggregate kW _{AC} power output of fourth inverter/solar module combination listed above (Quantity of inverters multiplied by either the Continuous Rated Output of each inverter (not DC limited) OR kW _{DC} Connected to each inverter (DC Limited)									kW _{AC}		
	Aggregate kW _A	Power Out	put of Al	LL Inverters (Constituting Dist	tribute	ed Genera	ation Facility		kWac	

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*INFORMATIO	N FOR NO	N-INVERTER BASE	D ENERG	Y PROD	UCTION EC	UIPMENT		
Synchronous Induction	er							
Rating	Rating		*Rated Volta	age		*Rated Current		
(kW)	(kVA)			Volts	Amps			
System Type Tested? (Total System)		YES	∐ NO (ã	attach prod	duct literature)			
*FOR SYNCHRONOUS MACHINES								
NOTE: Operand (Production of all the					and distributed a	and the facility		
NOTE: Contact utility to determine if all the information requested in this section is required for the proposed distributed generation facility.								
Manufacturer								
Model No.					t Copies of the Saturation Curve and the Vee Curve			
Torque Rated	DDM	Field Amnoros	Salient Non-Salient					
(lb-ft)	NEIVI	Field Amperes at rated generator voltage and current and % PF over-exception of the properties of the						
Type of Exciter		Output Power of Exciter	it rateu genera	ator voitage		and current and % PF over-excited Type of Voltage Regulator		
31.		·			· · · · · · · · · · · · · · · · · · ·			
Locked Rotor Current	Synchronous	s Speed	Winding Co	nnection	Minimum C	perating Frequency/Time		
(Amps)		(RPM)						
Generator Connection								
Delta	l D:	Wye	anaa (Vid)	1 -	Direct oxia Cub	Wye Grounded rect-axis Sub-transient Reactance (X'd)		
Direct-axis Synchronous Reactance (Xd)		Direct-axis Transient Reactance (X'd)						
(ohms) Negative Sequence Reactance		(ohms) Sequence Reactance Natural In			mnedance or G	(ohms) rounding Resister (if any)		
(ohms)	ocquerice reactance	(ohms)			(ohms)			
(OIIII3)			(cimic)					
*FOR INDUCTION MACHINES								
<u>NOTE</u> : Contact utility to determine if all the information requested in this section is required for the proposed distributed generation facility.								
Manufacturer					Model No.			
Version No.			Locked Rot	or Current				
VEISION NO.			LOCKEU NO	or Current	(Amps)			
Rotor Resistance (Rr)	Exciting Cu	urrent Rotor Resistar			• •	Reactive Power Required		
(ohms)	(Amps)			(i)	reactive r ower required			
Magnetizing Reactance (Xm)	(Amps) (ohms) o load) Stator Resistance			Rs)	VARS (Full load)			
(ohms)	,		nms)	,	,			
Stator Reactance (Xs)	it Reactance (Xd)	Phases						
(ohms)		(ohms)	Sing	le Phase	Three	Three Phase		
Frame Size	Design Letter			Temp. Rise	Temp. Rise			
					(°C)			
REVERSE POWER RELAY INFORMATION (LEVEL 3 REVIEW ONLY)								
Manufacturer					Model No.	Model No.		
Relay Type	Reverse Power Setting			Reverse Po	Reverse Power Time Delay (if any)			

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*INSURANCE DISCLOSURE

The attached terms and conditions contain provisions related to liability and indemnification and should be carefully considered by the interconnection customer. The interconnection customer shall carry general liability insurance coverage, such as, but not limited to, homeowner's insurance. The interconnection customer shall provide the utility with proof that it has a current homeowner's insurance policy or other general liability policy.

Proof of insurance must include:

- Facility Address
 Interconnection Customer as insured
- General Liability Coverage

Proof of Homeowner's or General Liability Insurance attached

☐ YES

*OTHER FACILITY INFORMATION							
One Line Diagram - A basic drawing of an electric circuit in which one or more conductors are represented by a single line and each electrical device and major component of the installation, from the generator to the point of interconnection, are noted by symbols.							
One Line Diagram attached YES							
Plot Plan - A map or sketch showing the distributed generation facility's location in relation to streets, alleys, or other geographic markers (i.e. section pin, corner pin, buildings, permanent structures, etc.). The map or sketch should also denote the location of the electric meter and disconnect used to isolate the distributed generation facility.							
Plot Plan attached YES							
*CUSTOMER SIGNATURE							
I hereby certify that all of the information provided in this Interconnection Request Application Form is true.							
Applicant Signature (signature must reflect Contact Name under section Intellinformation)	Date						
Printed Name							
An application fee is required before the application can be processed the appropriate fee is included with the application (see page 2).							
FOR UTILITY ENERGY USE ONLY							
Date Received Project ID							
UTILITY ACKNOWLEDGEMENT							
Receipt of application fee is acknowledged and this interconnection request is complete.							
Utility Representative's Signature	Date						
Printed Name	Title						

Submit completed form to:

MidAmerican Energy Company

Attn: Private Generation

P.O. Box 4350

Davenport, Iowa 52808-9986

PrivateGeneration@midamerican.com

Fax: 563-336-3568

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