

**Small Generator Facility
Tier 1 Interconnection Request Application Form**

(See ARSD chapter 20:10:36 for the requirements for a Tier 1
Interconnection.)

Applicant Contact Information:

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Telephone (Daytime): _____ (Evening): _____

Facsimile Number: _____

E-Mail Address: _____

System Installer:

Check if Owner Installed

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Telephone (Daytime): _____ (Evening): _____

Facsimile Number: _____

E-Mail Address: _____

Small Generator Facility Information:

Location (if different from above):

Public Utility: _____

Account Number (existing Public Utility customer): _____

Proposed Operation Mode: Qualified Facility Other

If a Qualified Facility, has Applicant completed FERC's "Notice of Self Certification"?

Yes No

Prime Mover Type: _____

Inverter Manufacturer: _____ Model: _____

Inverter Electric Nameplate Capacity: ____ (KW) ____ (kVA)

Inverter Electrical Connection: ____ (AC Volts) Phase: Single Three

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

Prime Mover: Photovoltaic Reciprocating Engine Fuel Cell

Turbine Other _____

Energy Source: Solar Wind Hydro Diesel Natural Gas

Fuel Oil Other _____

Is the inverter lab certified? Yes No

(If yes, attach manufacturer's cut sheet showing listing and label information from the appropriate listing authority, e.g. UL 1741 listing. If no, facility does not qualify for Tier 1 consideration. Refer to the Public Utilities Commission's rules found in ARSD chapter 20:10:36 for details.)

Estimated Commissioning Date: _____

Estimated Commissioning Cost: _____

Applicant Signature:

I hereby attest that the information submitted on this application is accurate to the best of my knowledge and have included the application fee of \$50 with my Tier 1 Interconnection Request:

Applicant Signature: _____

Title: _____ Date: _____

Application fee (\$50) included:

Tier 1 Interconnection Request Acknowledgement

Receipt of the application and application fee is hereby acknowledged.

Approval for a Tier 1 Small Generator Facility interconnection is contingent upon the Applicant's Small Generator Facility passing the Tier 1 screens and completion of the review process set forth in ARSD chapter 20:10:36 and is not granted by the Public Utility's signature on this Application form.

Public Utility Representative Signature: _____ Date: _____

Printed Name: _____ Title: _____

Indicate whether Public Utility plans to perform Witness Test:

Yes No

Note: The Public Utility shall retain a copy of this completed and signed form and return the original and any attachments to the Applicant.

Please mail completed application to:
MidAmerican Energy Company
Attn: Private Generation
P.O. Box 4350
Davenport, IA 52808-9986

PrivateGeneration@midamerican.com

Fax: 563-336-3568