




A Touchstone Energy® Cooperative 

04125 State Route 576 • Bryan Ohio 43506
Ph. 419-636-5051 • Fax 419-636-0194

**OHIO'S ELECTRIC
COOPERATIVES**

Your Touchstone Energy® Cooperatives 

ATTACHMENT 1

APPLICATION FOR DISTRIBUTED RESOURCE

MEMBER-OWNER'S INFORMATION

Name: _____

Address: _____

Contact Person: _____

Telephone/Cell: _____

Email: _____

Service Point Address: _____

PREPARER'S INFORMATION

Prepared and Submitted By: _____

Company: _____

Address: _____

Telephone/Cell: _____

Email: _____

The following information shall be supplied by the Member-Owner or Member-Owner's designated representative. All applicable items must be accurately completed in order that the Member-Owner's generating facilities may be effectively evaluated for interconnection with the Cooperative's Distribution System.

GENERATOR DETAILS

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: _____

Frequency: _____

Do you plan to interconnect the generator and operate in parallel with the Cooperative's electric distribution facilities? Yes No

If Yes, do you plan to export power? Yes No

If Yes, maximum amount expected: _____

If Yes, do you expect the amount of exported energy to exceed your requirements for electric energy at the service address on an annual basis? Yes No

Estimated annual requirements for electric energy at the service address (kWh): _____

Do you plan to use the output of the facility to serve your electric load? Yes No

Do you plan to retain, or sell to the Cooperative or its parent, the generator's environmental attributes (i.e., renewable energy credits)? Retain Sell

Expected Energizing and Start-up Date: _____

Normal Operation (please describe): _____

(Examples: provide power to meet base load, demand management, standby, back-up, other)

One-line Diagram attached: Yes No

Layout sketch showing lockable, "visible" disconnect device? Yes No

Have testing results been supplied to the Cooperative documenting conformance with the Cooperative's technical requirements? Yes No

(NOTE: Requires a YES for an Application to be considered complete.)

Have all necessary government permits and approvals been obtained for the project prior to this application? Yes No

(NOTE: Requires a YES for an Application to be considered complete.)

Has the generator been certified as a qualifying cogeneration or small power production facility under the Public Utility Regulatory Policies Act of 1978? Yes No

(NOTE: Generator must be certified as a qualifying cogeneration or small power production facility to export power.)

Have the generator manufacturer machine characteristics been supplied to the Cooperative? Yes No

North Western Electric Cooperative, Inc.
Application for Distributed Resource

Application fee: \$250.00

Please make checks payable to:
North Western Electric Cooperative, Inc.

Date: _____

Member-Owner Name: _____

By (Signature): _____

Name: _____

Title: _____

Please return completed application to:
North Western Electric Cooperative, Inc.
04125 State Route 576
Bryan, OH 43506