## KUB Application for Interconnection of Distributed Generation

This application is considered complete when it provides all applicable and correct information required below. Current Application Fee - \$500. Customer must also place a request for solar interconnection @ 865-558-2555.

CUSTOMER			
Name:			
Address:			
City:		_ State:	Zip:
Telephone:		Email Address:	
Electric Service Account Nu	ımber		
CONTACT (IF DIFFERENT	THAN CUSTOM	ER)	
Name:		•	
		_ State:	
		Email Address:	
OWNER OF SYSTEM (IF I	DIFFERENT THAN	I CUSTOMER)	
Name:			
City:			Zip:
		Email Address:	
PROJECT DESIGN/ENGIN			
Company: Mailing Address:			
Mailing Address: City:	County:	State:	Zip Code:
Phone Number.		Representative.	
Email Address:			
PE License:		Stat	e:
ELECTRICAL CONTRACT	TOR (AS APPLICA	ABLE)	
Company:	•	•	
Mailing Address:			
		State:	Zip:
		Representative:	
		Fax Number:	
		City/County/State:	

## **GENERATING FACILITY INFORMATION** Location (if different from above): Account Number: Distributor: # of Phases: Single Three # of Inverters in System: System Design Capacity: \_\_\_\_\_(kW) \_\_\_\_\_(kVA) Battery Backup: ☐ Yes ☐ No Model: If Yes - Manufacturer: Energy Source: Solar Wind Hydro Residential Battery Utility Scale Battery □ Utility Scale Fuel □ Gas □ Diesel □ Other (describe) Total Site Load (highest kW demand last 12 months) Residential Commercial Industrial Annual Estimated Generation \_\_\_\_\_(kWh) Estimated Installation Date: \_\_\_\_\_Estimated In-Service Date: \_\_\_\_ ADDITIONAL INFORMATION - SINGLE LINE DIAGRAM In addition to the items listed above, please attach a detailed one-line diagram of the proposed facility, all applicable elementary diagrams, major equipment (generators, transformers, inverters, circuit breakers, protective relays, batteries, number and location of PV panels, etc.), specifications, test reports, etc., and any other applicable drawings or documents necessary for the proper design of the interconnection. Also describe the address or grid coordinates of the facility. The customer agrees to provide KUB with any additional information required to complete the interconnection. PERMISSION TO INTERCONNECT Customer must not operate their generating facility in parallel with Distributor's system until they receive written authorization for parallel operation from Distributor. Unauthorized parallel operation could result in injury to persons and/or damage to equipment and/or property for which the customer may be liable. INTERCONNECTION CUSTOMER SIGNATURE I hereby certify that, to the best of my knowledge, the information provided in this application is true. Title: Date:

## KUB CONTACT FOR APPLICATION SUBMISSION AND FOR MORE INFORMATION: KUB Contact: Bill Warren Title: Business Management Analyst Address: 4505 Middlebrook Pike, Knoxville, TN 37921 Phone: (865) 558-2592 Email: Bill.Warren@KUB.org