



DER INTERCONNECTION SUBMITTAL PACKAGE - STANDARD INTERCONNECTION

Congratulations on your decision to invest in a Distributed Generation (DER) system and helping Hawaii attain its renewable energy goal.

In order to help you submit your DER INTERCONNECTION application in a complete manner, there are two documents attached to this letter:

- 1) DER Submittal Package Checklist
- 2) DER INTERCONNECTION Application Cover Form

The DER INTERCONNECTION Application Cover Form must be completed, signed and submitted with your completed application. Failure to complete and sign the DER INTERCONNECTION Application Cover Form could cause your application to be returned and delay the review of your application.

The DER Submittal Package Checklist is for your records only and does not need to be returned with the required documents. The DER Submittal Package Checklist will help to ensure that you have completed and are returning all of the forms and documentation required to begin the review of your application in a timely manner.

Failure to complete and return any of the required documents could cause a delay in reviewing your application and in providing approval for your project.

We look forward to working with you on providing a final approval for your new distributive generation system.

Please send your Application Submittal Form with required attachments in one packet to the correct address below.

| Hawaiian Electric | | Maui County | Hawai'i Island |
|---|---|---|--|
| <i>Via United States Postal Service:</i> | <i>Via Private Delivery Services (UPS, FedEx, etc.):</i> | <i>Via United States Postal Service:</i> | <i>Via United States Postal Service:</i> |
| Hawaiian Electric Attn: SIA; CP12-SI P.O. Box 2750 Honolulu, HI 96840-0001 | Hawaiian Electric Attn: SIA; CP12-SI 220 South King St., Suite 1280 Honolulu, HI 96813 <i>(No walk-ins, please)</i> | Hawaiian Electric Attn: Standard Interconnection Agreement P.O. Box 398 Kahului, HI 96733-6898 | Hawaiian Electric Attn: Standard Interconnection Agreement; Engineering P.O. Box 1027 Hilo, HI 96721-1027 |
| <i>Submit by e-mail:</i> SIAinfo@hawaiianelectric.com | | <i>Submit by e-mail:</i> SIAMauiCounty@hawaiianelectric.com | <i>Submit by e-mail:</i> SIAHawaiiIsland@hawaiianelectric.com |



DER INTERCONNECTION SUBMITTAL PACKAGE CHECKLIST - ALL PROGRAMS

- Distributed Energy Resource (DER) Interconnection Application Cover Form
- Signed Agreement (for all procurement agreements)
 - Please provide proof that you are an authorized signatory if applicable
- Project Information Exhibit for Specific Program
 - Complete all fields with necessary information or NA
- Project Specifications Exhibit for Specific Program
 - Site Plan
 - ◆ Show affected property or properties
 - ◆ Show location of Distributive Generation
 - ◆ Show location of the meter
 - ◆ Show location of the AC disconnect
 - Single line
 - ◆ Show all equipment electrical connections
 - ◆ Stamped and signed for projects $\geq 30\text{kW}$, unless dictated by County requirements.
 - ◆ Drawings should include at a minimum –
 - Meter location
 - Switch gear
 - Panels
 - Inverters
 - Disconnect
 - System Voltage
 - Energy Storage (if applicable)
 - Three Line
 - ◆ Show all equipment electrical connections
 - ◆ Wet Stamped and signed for projects $\geq 30\text{kW}$, unless dictated by County requirements.
 - ◆ For 3 Phase service – stamp not required at submittal
 - ◆ Drawings should include at a minimum –
 - Meter location
 - Switch gear
 - Panels
 - Inverters
 - Disconnect
 - System Voltage
 - Energy Storage (if applicable)

ITEM CHECKLIST FOR A COMPLETE SUBMITTAL PACKAGE - ALL PROGRAMS (cont.)

- Project Specifications Exhibit for Specific Program (cont.)
 - Equipment Spec sheets
 - ◆ Panels
 - ◆ Inverters
 - ◆ Disconnects
 - ◆ Relay and Trip Scheme
 - ◆ Energy Storage, if applicable
 - ◆ Fuses and Circuit Breakers
 - ◆ Any necessary additional information on project
 - For Energy Storage Systems
 - ◆ System Performance Data
 - ◆ Control Description
 - ◆ Operational Descriptions
- Inverter Ride through confirmation
 - Acknowledged via signature on DER Interconnection Application Cover Form
- Supplemental pre-approval
 - Acknowledged via signature on DER interconnection Application Cover Form
- Notice and Disclaimer (if applicable)
- Pictures at application submission of
 - Current meter socket
 - Main service disconnect

DER Interconnection Application Cover Form

Form must be completed legibly and with all required documents attached. Incomplete forms may not be accepted.



PROGRAM, SUBMISSION & SYSTEM TYPE

PROGRAM: Choose your program **SYSTEM:** Choose your System Type **SUBMISSION:** Choose your submission type
If you are revising your APPLICATION please tell us if you are : What is your _____ and by _____ kW.
Are you revising your INVERTER: YES NO, if YES by _____ kW.

PROPERTY OWNER INFORMATION

| | | | |
|-----------------|--|-------------------|---------------------|
| Property Owner: | | Point of Contact: | |
| Address: | | Phone/Cell Phone: | P1: _____ P2: _____ |
| | | Email: | |

CUSTOMER/ ACCOUNT HOLDER INFORMATION

| | | | |
|------------------|--|-------------------|---------------------|
| Account Holder: | | Point of Contact: | |
| Service Address: | | TMK: | |
| Account #: | | Phone/Cell Phone: | P1: _____ P2: _____ |
| Meter #: | | Email: | |

SYSTEM OWNER INFORMATION (IF DIFFERENT FROM CUSTOMER)

| | | | |
|----------|--|-------------------|---------------------|
| Name: | | Point of Contact: | |
| Address: | | Phone/Cell Phone: | P1: _____ P2: _____ |
| | | Email: | |

SYSTEM OPERATOR INFORMATION (IF DIFFERENT FROM CUSTOMER OR OWNER)

| | | | |
|----------|--|-------------------|---------------------|
| Name: | | Point of Contact: | |
| Address: | | Phone/Cell Phone: | P1: _____ P2: _____ |
| | | Email: | |

ELECTRICAL CONTRACTOR INFORMATION

| | | | |
|-------------------|--|-------------------|---------------------|
| Name: | | Company: | |
| Hawaii License #: | | Phone/Cell Phone: | P1: _____ P2: _____ |
| Address: | | Email: | |

PRIMARY CONTACT INFORMATION (FOR ADDITIONAL INFORMATION)

| | | | |
|----------|--|-------------------|---------------------|
| Name: | | Email: | |
| Company: | | Phone/Cell Phone: | P1: _____ P2: _____ |

*We limit our data sharing as covered in our privacy policy, available on our website

The property owner at the service address must complete this section. Please mark boxes below and sign:

- Attached is the completed and signed, program specific agreement.
- Attached is the program specific stamped and signed electrical drawings (one-line and (three-line (≥ 30 kW or per county requirements).
- Attached are the equipment specification sheets for this system.
- I acknowledge that the existing meter socket is in sound operating condition and understand that I am responsible for any needed upgrades to meet current code requirements. Photos of meter socket & main service disconnect attached.
- I acknowledge my review of the appropriate program documentation and agree to abide by that program's specific requirements.
- I understand that for systems >10 kW proof of insurance will be required prior to final execution.
- I certify that, to the best of my knowledge, all the information provided in this submission is true and correct. I will not interconnect and operate without prior written approval from (Hawaiian Electric (Maui Electric (Hawaii Electric Light.
- INVERTER BASED GENERATION:** I acknowledge that the inverters used for this system will be compliant with all of the Hawaiian Electric Companies current requirements and understand that proof of compliance will be necessary prior to execution.

The technical review may require a no cost Supplemental Review: I pre-authorize I do not pre-authorize

- I hereby acknowledge and agree that: (1) the distributed generation facility shall meet the Company's Interconnection Standards stated in Appendix I: Distributed Generating Facility Interconnection Standard Technical Requirement of Rule 14H; (2) the specific characteristics or needs of each distributed generating facility may change its interconnection requirements; and, therefore, (3) the distributed generation facility may be subject to additional interconnection requirements that are necessitated by the results of the technical review process.

Property Owner's Signature: _____

Date: _____

Printed name: _____

APPENDIX II-B

**TECHNICAL DESCRIPTION AND REGISTRATION FOR NON-EXPORT SYSTEMS
(ONLY USE FOR RULE 3B REGISTRATIONS OR MOMENTARY-/NON-PARALLEL
OPERATION)**

Check One:

- Non-interconnected generators (Rule 3B Registration) (Complete Sections 1, 2 and 4 only)
- Momentary-Parallel Operation (Complete Sections 1, 3 and 4 only)
- Non-Parallel Operation (Complete Sections 1, 3 and 4 only)
- Parallel Operation (**STOP – Inquire with your utility for the program that applies for your system**)

Under no circumstances shall a Customer–Generator interconnect and operate a generating facility in parallel with the company’s electric system without prior written approval by the Company.

SECTION 1: PARTY INFORMATION:

Customer Information:

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone (Daytime): () _____ Phone (Evening): () _____

Fax: () _____ E-Mail Address: _____

Electric Service Company and Account No.: _____

Facility Location (if different from above): _____

Facility Location Tax Map Key No.: _____

Owner of the Generating Facility (if different from Customer)

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

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Phone (Daytime): () _____ Phone (Evening): () _____

Fax: () _____ E-Mail Address: _____

Operator (if different from Customer and Owner)

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone (Daytime): () _____ Phone (Evening): () _____

Fax: () _____ E-Mail Address: _____

SECTION 2: NON-INTERCONNECTED GENERATORS - RULE 3B REGISTRATION

System Description _____ (attach single line drawing)

Prime Mover Photovoltaic Reciprocating Engine
 Fuel Cell Turbine
 Other (describe) _____

Energy Source Solar Wind Hydro
 Diesel Natural Gas Fuel Oil
 Other (describe) _____

Energy Storage (if applicable):

Stand-by power supply Serving isolated load
 Other (describe): _____

Will the Distribution Grid be used to charge the storage Device?

No
 Yes (provide manufacturer's data sheet for charger)

If yes, what times of the day do you expect to charge your storage device? : _____

SECTION 3: INTERCONNECTED, NON-PARALLEL, MOMENTARY-PARALLEL OPERATION

System Description _____ (attach single line drawing)

Attach specifications of your Switch or Inverter to verify 100ms (or less) operation or non-parallel operation.

Inverter

Manufacturer(s) _____ Model(s) _____

Nameplate Rating(s)(CEC-CSI) _____ (kW) _____ (kVA) _____ (AC Volts)

Single Phase or Three Phase

Prime Mover Photovoltaic Reciprocating Engine

Fuel Cell Turbine

Other (describe)

Energy Source Solar Wind Hydro

Diesel Natural Gas Fuel Oil

Other (describe) _____

Since your system is self-excited, does it use a storage system? Yes No

If yes, what is the storage system information (attach Data Sheets)

Manufacturer: _____ Model: _____

System Voltage: _____ Total usable kWh Capacity _____

Total Discharge Power kW: _____ Maximum Charge power kW _____

Description of Battery use:

Stand-by power supply Serving isolated load

Other (describe): _____

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Will the Distribution Grid be used to charge the storage Device?

No

Yes (provide manufacturer's data sheet for charger)

If yes, list what times of the day do you expect to charge your storage device?: _____

SECTION 4 (INSTALLATION DETAILS):

Installing Electrical Contractor: _____

Firm: _____ License No.: _____

Mailing Address: _____

City _____ State: _____ Zip: _____

Phone (daytime):() _____ Phone (Evening):() _____

Fax: () _____ E-Mail Address: _____

Estimated Installation Date (if known): _____

Insurance Carrier (if required): _____

Applicant: _____ Date: _____

MAUI ELECTRIC COMPANY, LIMITED