



# LENOIR CITY UTILITIES BOARD APPLICATION FOR INTERCONNECTION OF RENEWABLE GENERATION

Please email to [newservice@LCUB.com](mailto:newservice@LCUB.com) Call 865-988-0716 for information.

## PART 1: CONTACT INFORMATION

### A. CUSTOMER INFORMATION

Name: \_\_\_\_\_

Site Address: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Electric Service Account Number: \_\_\_\_\_ - \_\_\_\_\_ Meter Number: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Mailing Address (If different): \_\_\_\_\_

Email Address: \_\_\_\_\_

### B. PROJECT DESIGN/ENGINEERING (AS APPLICABLE)

Company: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Representative: \_\_\_\_\_

Email Address: \_\_\_\_\_ Fax Number: \_\_\_\_\_

### C. SOLAR CONTRACTOR/INSTALLER (AS APPLICABLE)

Company: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Representative: \_\_\_\_\_

Email Address: \_\_\_\_\_ Fax Number: \_\_\_\_\_

### D. NABCEP ACHIEVEMENT LEVEL (REQUIRED)

Associate Level       Installation Professional       Technical sales

Certificate Number: \_\_\_\_\_

## **PART 2: TECHNICAL DATA**

### **A. GENERATION TYPE**

Solar PV    Wind    Low-Impact Hydropower    Biomass    Other: \_\_\_\_\_

### **B. TVA PROGRAM**

Dispersed Power Production  
 Other: \_\_\_\_\_

### **C. INSTALLATION INFORMATION**

Residential    Non-Residential    Other: \_\_\_\_\_ System  
Rating: \_\_\_\_\_ (kW DC)   Annual Estimated Generation: \_\_\_\_\_ (kWh) Total  
System Cost (Required) \$ \_\_\_\_\_  
Point of Interconnection:    Load Side Customer Panel    Line Side Overhead  
 Line Side CT Cabinet    Line Side Pad Mounted Transformer  
 Other \_\_\_\_\_

### **D. INVERTER DATA (IF APPLICABLE)**

Manufacturer: \_\_\_\_\_ Model: \_\_\_\_\_

Rated Power Factor (%): \_\_\_\_\_ Rated Voltage (Volts): \_\_\_\_\_ Rated Amperes: \_\_\_\_\_

Inverter Type (ferroresonant, step, pulse-width modulation, etc.): \_\_\_\_\_  
Single or Three Phase \_\_\_\_\_ Type Commutation: Forced \_\_\_\_\_ Line \_\_\_\_\_

Harmonic Distortion: Maximum Single Harmonic (%) \_\_\_\_\_ Maximum  
Total Harmonic (%) \_\_\_\_\_ Fault Current: \_\_\_\_\_

UL-1741 Compliant    IEEE 1547 Compliant

## **PART 3: SUPPORTING DOCUMENTS**

### **A. ONE LINE DIAGRAM**

Please attach a detailed one-line diagram of the proposed facility, including wire and fuse sizes, major equipment (inverters, circuit breakers, protective relays, number and location of PV panels, etc.), and any other items pertaining to the system. For generation projects over 50kW, indicate interlocks and methods of operation to disconnect system from utility source upon loss of utility power.

### **B. SITE PLANS**

Please attach a detailed site plan that includes physical address, both the revenue (billing) and generation meter locations, inverter locations, and panel locations. For generation projects over 50kW please provide AutoCAD files in state plane coordinates.

**C. SPECIFICATIONS & DOCUMENTATION**

In addition to the items listed above, please attach major equipment specification documentation, manufacturer cut sheets (inverter, PV panels, etc.), or test reports, etc., and any other applicable drawings or documents necessary for the proper design of the interconnection. Indicate which specific items are being used on all documentation.

Customer is responsible for compliance with both TVA and LCUB requirements applicable to the project type. Please refer to the TVA Guidelines for their program.

**PART 4: PERMISSION TO INTERCONNECT**

Customer must not operate its generating facility in parallel with LCUB’s system until it receives written authorization for parallel operation from LCUB. Unauthorized parallel operation could result in injury to persons and/or damage to equipment and/or property for which Customer may be liable.

**LCUB advises Customer and Contractor not to purchase or install any equipment until proper approval has been given in writing.**

Customer agrees to provide LCUB with any additional information required to complete the interconnection.

**PART 5: FEES**

Customer’s LCUB Electric Service Account Number, provided on this application, may be charged according to the Schedule of Fees and Charges for: a) upon application, a non-refundable application fee; b) upon interconnection, a turn-on fee; and c) where applicable, a Monthly meter reading fee until the Generation meter is removed. By signing below, I understand and agree to these charges.

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date

**For LCUB Use**

\_\_\_\_\_  
Received by

\_\_\_\_\_  
Date

\_\_\_\_\_  
Work Request No.