## CAISO as an Affected System

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**STUDY REQUEST**

Studies conducted per [CAISO Tariff Appendix KK](https://www.caiso.com/documents/ferc-order-and-ipe-2023-pending-iso-tariff-appendix-kk.pdf) Section 14.5

Provide **one copy** ofthis completed form.

1. Name of system project is interconnecting to:

2. The Interconnection Customer provides the following information:

a. Address or location, including the county, of the proposed facility site:

Project Name:

Project Queue Number:

Project Location:

Street Address:

City, State:

County:

Zip Code:

GPS Coordinates (decimal format):

Latitude:  Longitude:

b. Requested Interconnection Service Capacity (Desired Net MW at POI):  **MW**

c. Type of project (i.e., gas turbine, hydro, wind, etc.) and general description of the equipment configuration (if more than one type is chosen include **gross** installed **MW** **for each**).

Cogeneration   (MW)

Combined Cycle   (MW)

Fuel Cell   (MW)

Gas Turbine  (MW)

Hydro  (MW)

Photovoltaic  (MW)

Reciprocating Engine   (MW)

Solar Thermal  (MW)

Steam Turbine   (MW)

*If more than one:*

(MW)

Wind Turbine  (MW)

Storage   (MW)

Other (please describe):  (MW)

Generator Type:       Fuel Type:

Comments:

General description of the equipment configuration (e.g. number, size, type, etc):

d. Proposed In-Service Date (first date transmission is needed to the facility), Trial Operation date and Commercial Operation Date in MM/DD/YYYY format and term of service (**dates must be sequential**):

Proposed In-Service Date:

Proposed Trial Operation Date:

Proposed Commercial Operation Date:

Proposed Term of Service (years):

e. Approximate location of the proposed Point of Interconnection (i.e., specify transmission facility interconnection point name, voltage level, and the location of interconnection);

f. Interconnection Customer data (set forth in Attachment A)

**The Interconnection Customer shall provide to the CAISO the technical data called for in GIDAP Appendix 1, Attachment A -** [**Generating Facility Data**](http://www.caiso.com/PublishedDocuments/generating-facility-data-attachment-a-to-appendix-1.xlsm)**. This form must be completed and submitted as part of this CAISO as an Affected System Study Request.**

3. The PTO will provide the estimated study deposit amount. It will be memorialized in the Affected System Study Agreement provided by the PTO and due to the PTO upon execution of the Agreement.

4. This CAISO as an Affected System Study Request shall be submitted to the CAISO:

Electronic Submission  
[IRInfo@caiso.com](mailto:IRInfo@caiso.com)

Via Mail:

California ISO

Attn: Grid Assets

P.O. Box 639014

Folsom, CA 95763-9014

***Overnight address:***

California ISO  
Attn: Grid Assets  
250 Outcropping Way  
Folsom, CA 95630

5. This Interconnection Request is submitted by:

Legal name of the Interconnection Customer:

By (signature if submitting hardcopy):

Name (type or print):

Title:

Date:

**INFORMATION REQUEST SHEET:**

**CAISO AS AN AFFECTED SYSTEM STUDY AGREEMENT (CASSA)**

***All information must be complete before an agreement will be processed.***

|  |  |
| --- | --- |
| Full legal name of company (agreement holder) | (Please confirm legal spelling, including capitalization and punctuation) |
| Legal address |  |
| Name of primary representative |  |
| Title |  |
| Company |  |
| Address  (Street address is required) |  |
| City/State/Zip code |  |
| Email address |  |
| Phone |  |
| Fax |  |
| Name of alternative representative |  |
| Title |  |
| Company |  |
| Address  (Street address is required) |  |
| City/State/Zip code |  |
| Email address |  |
| Phone |  |
| Fax |  |

**REQUIRED FOR ELECTRONIC SIGNATURE PROCESS:**

|  |  |
| --- | --- |
| Name of signatory |  |
| Email address |  |