

Appendix 1 Interconnection Request INTERCONNECTION REQUEST

NO HARD COPY REQUIRED FOR INTERCONNECTION REQUESTS SUBMITTED ELECTRONICALLY VIA RIMS 5

Provide **one hard copy** of this completed form pursuant to Section 7 of this Appendix 1 below for non-electronic submissions.

If submitting hard copy, please use a binder clip to keep pages together. No staples, binders, paper clips or other forms of binding. Thank You!

1. The undersigned Interconnection Customer submits this request to interconnect its Generating Facility with the CAISO Controlled Grid pursuant to the CAISO Tariff (**check only one**):
- Fast Track Process.
 - Independent Study Process.
 - Queue Cluster Process.
 - Annual Full Capacity Deliverability Option pursuant to GIDAP Section 9.2.
(Required fields: 3, 4a Project name including Q#, 4e, 8, and 9 only.)
 - Deliverability from Non-Participating TOs pursuant to GIDAP Section 9.4.

2. This Interconnection Request is for (**check only one**):
- A proposed new Generating Facility.
 - An increase in the generating capacity or a Material Modification to an existing Generating Facility.

3. Requested Deliverability Status is for (**check only one**):
- Full Capacity (For Independent Study Process and Queue Cluster Process only)
(Note – Deliverability analysis for Independent Study Process is conducted with the next annual Cluster Study – See GIDAP Section 4.6)
 - Partial Deliverability for % of electrical output
(for Independent Study Process and Queue Cluster Process ONLY)
 - Energy Only

Comments:

4. The Interconnection Customer provides the following information:
- a. Address or location, including the county, of the proposed new Generating Facility site or, in the case of an existing Generating Facility, the name and specific location, including the county, of the existing Generating Facility;

Project Name:

Prohibited Project Names List: <http://www.caiso.com/Documents/ProhibitedProjectNames.xlsx>
Project Name Features Not Allowed:

- Company names or types (i.e., LLC)
- Duplications
- MW values
- More than two digits
- Roman numerals
- Special Characters
- Abbreviations similar to those used by CAISO
- Use of the word "Phase" or "Expansion"
- "License plate" looking configurations

Queue #: (**Only for existing projects requesting Annual Deliverability Assessment in item 1.)**

Project Location:

Street Address:

City:

County:

State:

Zip Code:

GPS Coordinates (**decimal format**):

Latitude:

Longitude:

b. Provide the following project megawatt values.

- **The MW values must match Attachment A Items 2A thru 2E**
- **If project is an increase to an existing project, provide values based on the MW increase only.**

Total Generating Facility Gross Output: MW

Generating Facility Auxiliary Load: MW

Maximum Net Megawatt Electrical Output: MW* **OR** Net Megawatt increase: MW**

Total Generating Facility Output less Generating Facility Auxiliary Load
**This is for a proposed new Generating Facility*

***This is for an increase or Material Modification to an existing Generating Facility*

Anticipated losses between the Generating Facility and POI: MW

Desired net MW at POI MW

Maximum Net Megawatt Electrical Output less Anticipated Losses

This MW value is the basis for delineation between large (>20 MW) and small projects (≤20 MW), and the pro rata basis for cost allocations of Reliability Network Upgrades (RNUs) except short circuit related RNUs in the Cluster Phase I and Phase II interconnection studies. This is the value that will appear in the ISO Generation Interconnection Queue Report. Your TP Deliverability Allocations will not be able to exceed this value.

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 MW for each**).

- **If project is an increase to an existing project, provide values based on the MW increase only.**

Cogeneration Select Fuel Type (MW)

Combined Cycle Select Fuel Type (MW)

Fuel Cell Select Fuel Type (MW)

Gas Turbine (MW)

Hydro (MW)

Photovoltaic (MW)

Reciprocating Engine Select Fuel Type (MW)

Solar Thermal (MW)

Steam Turbine Select Fuel Type (MW)

If more than one:
Select Fuel Type (MW)

Wind Turbine (MW)

Storage Select Fuel Type (MW)

Other (please describe): (MW)
Generator Type: Fuel Type:
Comments:

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

If project is an increase to an existing project, describe the entire facilities here.

- d. Proposed In-Service Date (first date transmission is needed to the facility), Trial Operation Commencement date and Commercial Operation Date in **MM/DD/YYYY format** and term of service **(dates must be sequential, proposed Commercial Operation Date may not be more than seven (7) years from date of application)**:

(MM/DD/YYYY)

Proposed In-Service Date:

Proposed Trial Operation Commencement Date:

Proposed Commercial Operation Date:

Proposed Term of Service (years):

- e. Name, address, telephone number, and e-mail address of the Interconnection Customer's contact person (primary person who will be contacted);

First Name:

Last Name:

Title:

Company Name:

Street Address:

City:

State:

Zip Code:

Phone Number:

Fax Number:

Email Address:

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

Substation or Transmission Line Name: Voltage Level: kV

- g. 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.

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5. **Applicable deposit amount made payable to California ISO.** Send check or wire funds to CAISO (see section 7 for details) along with the:
- a. Interconnection Request for processing.
 - b. Attachment A (Interconnection Request Generating Facility Data).

Study Deposit for Cluster and ISP projects if \$150,000 regardless of MW size.

6. Evidence of Site Exclusivity as specified in the GIDAP and name(s), address(es) and contact information of site owner(s) (check one):

Is attached to this Interconnection Request

If attaching evidence of Site Exclusivity, please answer the following:

a. Type of Site Exclusivity Provided:

(Note that letters of intent or similar agreements are not acceptable as proof of Site Exclusivity)

Proof of Ownership (Deed)

Lease Agreement

Option to Purchase

Option to Lease

Other? Please Explain

b. Is Site Exclusivity granted to the Interconnection Customer (i.e. to the same entity with the same name) identified in Section 9 of this Interconnection Request?

Yes

No

If No, please explain relationship between entities:

c. Term of Agreement? Including agreement effective upon and execution of option (If applicable)?
Years

d. Term of Option, including renewals? (If applicable) Years

e. Acreage acquired or reserved for project site?

Deposit in lieu of Site Exclusivity via check or Fed Wire, Site Exclusivity will be provided at a later date in accordance with this GIDAP

Deposit in Lieu of Site Exclusivity = \$250,000 for projects greater than 20 MW, \$100,000 for projects equal to or less than 20 MW. ISP and FT projects must submit valid documents.

7. This Interconnection Request shall be submitted to the CAISO via [RIMS 5](#) or sent to the representative indicated below.

California ISO
Attn: Grid Assets
P.O. Box 639014
Folsom, CA 95763-9014

OR

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

Deposit can be made via Fed Wire transfer or check – ACH is not accepted. Please be sure and reference the project name in the notes area of wire transfer or check for easy matching. Wiring information:

Wells Fargo Bank (LGIP)

ABA 121000248

Acct 4122041825

Federal Tax ID # 94-3274043

CAISO is a Corporation.

Funds must be received no later than close of cluster window for cluster projects.

8. Representative of the Interconnection Customer to contact:

[To be completed by the Interconnection Customer]

First Name:

Last Name:

Title:

Company Name:

Street Address:
City:
State:
Zip Code:
Phone Number:
Fax Number:
Email Address:

9. This Interconnection Request is submitted by:

Legal name of the Interconnection Customer:
(Punctuation and spelling of Legal name must match Secretary of State document exactly)

State of Origin for Secretary of State Document:

Name of Parent Company (if applicable):

These boxes must be checked for electronic submission

- By executing this Interconnection Request, Interconnection Customer hereby consents to CAISO's disclosure of its confidential information during the evaluation of this request to those Affected Systems who have entered into an appropriate non-disclosure agreement with CAISO and pursuant to Appendix DD of the CAISO Tariff, including Sections 3.7 and 15.1.2.*
- Your electronic signature below indicates your agreement with the following statement: By typing my name in the following line and clicking on the submission box below, the Interconnection Customer identified above certifies that the information contained in this Interconnection Request is true and correct to the best of its knowledge.*

By (original signature if submitting hard copy): _____

First Name:

Last Name:

Title:

Date (MM/DD/YYYY):

Link to required Generating Facility Data Form (Attachment A to Appendix 1):

<http://www.caiso.com/PublishedDocuments/GeneratingFacilityData-AttachmentAtoAppendix1.xlsm>

The Generating Facility Data (Attachment A to Appendix 1) is a separate Excel file (.xlsm) and is a required element of a project's Interconnection Request submission.