THE DAYTON POWER AND LIGHT COMPANY

SIMPLIFIED APPLICATION FOR INTERCONNECTION

UNDER THE SIMPLIFIED LEVEL 1, LEVEL 1.1, OR LEVEL 1.2

REVIEW PATHS
SHORT APPLICATION FORM
FOR INTERCONNECTION OF CERTIFIED INVERTER BASED GENERATION EQUIPMENT
FIFTY KILOWATTS OR SMALLER TO THE ELECTRIC DISTRIBUTION SYSTEM

Electric Distribution Company: The Dayton Power and Light Company

Electric Distribution Company’s Designated Contact Person:

    DP&L Business Call Center
    Attn: Rob Beeler
    1900 Dryden Road
    Dayton, OH 45439
    Phone: (800) 253-5801
    Email: interconnection@dplinc.com

Please complete all sections of the application and include all attachments. Depending upon the
information you provide, more information may be required. If so, DP&L will contact you at that time.

Processing Fee:

The application fee is based on actual costs per one-tenth of an hour on time spent on the simplified
review. The following fee has been filed with the Public Utilities Commission of Ohio:

Rate: $6.63 per 1/10th hour

SECTION 1 - Applicant Information

1.1 Legal Name of the Applicant:

Name: ____________________________________________________________
Address: __________________________________________________________
Phone:  (_____) ________________________________________________
E-mail address: ____________________________________________________

1.2 Applicant’s Electric Service Customer Account Number: ____________________________

1.3 Name and Address of the Applicant as it appears on the Applicant’s electric bill from the Electric
Company:

Name: ____________________________________________________________
Address: __________________________________________________________
Phone:  (_____) ________________________________________________
1.4 Proposed Generation Ownership (Please check one):

( ) Customer owned
( ) Third Party owned

Explanation of ownership arrangement: ________________________________

1.5 ( ) Check if you are applying to be a net metering customer
- If so, please attach the completed Net Metering Service Information Request form

SECTION 2 – Consulting Engineer/Contractor Information

2.1 Consulting Engineer or Contractor if applicable:

Name: ________________________________
Address: ________________________________
Phone: (______) ________________________________
E-mail address: ________________________________

SECTION 3 – Generation Equipment and Customer Location Information

3.1 Estimated In-Service Date: ________________________________

3.2 Existing Electric Service at the Customer’s Location:

Capacity: ________ Amperes Voltage: ________ Volts

Service Character: ( ) Single Phase ( ) Three Phase

DP&L Rate #: ________

3.3 Location of Protective Interface Equipment on Property (e.g. “southwest corner of lot”):

______________________________

3.4 Indicate all possible operating modes for this generation equipment:

This generation equipment is intended to be used to:

1. ________________________________
2. ________________________________
3. ________________________________

(Attach additional pages as necessary, labeled “Additional Operating Modes”)
3.5 Energy Producing Equipment Information:

Manufacturer: ________________________________
Model No. ________________________________
Version No. ________________________________
Fuel Source Type (Solar, Wind, etc.): ________________________________
Total kW of Proposed Facility: ________________________________
kVA Rating: ________________________________ Voltage Rating: ________________________________

3.6 Inverter Information:

Manufacturer: ________________________________
Model No. ________________________________
Version No. ________________________________
kW Rating of each Inverter: ________________________________
Number of Inverters (if more than one): ________________________________
kVA Rating: ________________________________ Voltage Rating: ________________________________

3.7 Total Generator Nameplate Rating kW (include all inverters if inverter based system): __________
Expected kWh output of generation: __________

SECTION 4 - Attachments

4.1 Please provide the following attachments:

- Testing results documenting conformance with the Company’s technical requirements
- Documentation confirming that a nationally recognized testing and certification lab has listed the equipment
- One Line Diagram (specific to Customer’s installation)
- Installation Test Plan
- Equipment Manufacturer’s Recommended Maintenance Schedule
- Site diagram showing disconnect switch location

CUSTOMER NAME: TITLE:

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CUSTOMER SIGNATURE: DATE:

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** If all sections of the application are not complete and/or attachments are missing, it will delay the processing of your application.
The Dayton Power and Light Company ("Company")

Net Metering Service Information Request

Customer’s Name: ________________________________________________________________

Account Number: __________________________________ Rate Number: _________________

Service Address: _________________________________________________________________

City: __________________________ State: OH Zip Code: _____________________________

Contact Person (if different than Customer): ________________________________

Telephone Number: _____________________________________________________________

Address: ______________________________ City: __________________________

State: ____________ Zip Code: ______________________________

Email Address: _________________________________________________________________

Generation equipment ownership (check one):
Will the Customer:  Own: _______ Rent: _______ Lease: _______ Other: ______
If other please describe: _________________________________________________________

A. Total generating capacity: ___________ kW
B. Expected Annual Output: ___________ kWh
C. Expected Capacity Factor = B / (A *8760)
   Expected Capacity Factor: ___________ %

Capacity Factor is the ratio of what the facility should produce compared to what it would produce if 100% efficient, 100% of the time.

Customer qualifies for net metering if the generating facility uses as its fuel either solar, wind, biomass, landfill gas or hydropower or uses a micro-turbine or fuel cell which is located on the Customer’s premises (located at the same address as Customer’s account). The Customer’s generating equipment must operate in parallel with the Company’s transmission and distribution systems. The Customer’s generation equipment must be intended to offset part or all of the Customer’s requirements for electricity. Generating equipment which is significantly oversized, as compared to the Customer’s maximum demand, may not qualify for net metering and may incur additional interconnection costs. The Customer
or its Developer must complete an interconnection application and receive approval to interconnect in order to qualify for net metering service. The Customer’s equipment must be inspected before net metering service may begin. If Customer is served by a competitive retail electric service (CRES) provider, Customer should make arrangements with its CRES provider to receive net metering credits in accordance with OAC 4901:1-21-13.

The Customer acknowledges that it has read the Company’s Net Metering rules found in Tariff Sheet No. D5 and agrees to all terms and conditions contained therein, including without limitation those specified in the Company’s Distribution Interconnection Tariff, Tariff Sheet No. D35. Specifically, the Customer understands and agrees that a meter, which is capable of registering the flow of electricity in each direction, must be in service at the facility. If a meter is not in service with this capability, the Customer must submit a written request for the Company at the Customer’s cost to acquire, install, maintain, and read an approved meter. All costs related to this meter shall be borne by the Customer. Customer acknowledges and agrees that operation of Customer’s generation facility is intended primarily to offset part or all of Customer’s electricity requirements in accordance with the Company’s Net Metering rules.

Meter Exchange Fee:

The purpose of this fee is the installation and/or reprogramming of a bidirectional meter that is capable of measuring the flow of electricity in two directions.

Charge: $95.00

________________________________________________________
Requested By:                                               Approved By:

________________________________________________________
Customer Name                                                  Name

________________________________________________________
Authorized Signature                                          Company Signature

________________________________________________________
Date                                                            Date
RELEASE OF PERSONAL INFORMATION

By signing this form, I acknowledge that I am giving
______________________________ (Consulting Engineer/Contractor) access to my Dayton Power and Light account information. Account information can include account number, rate, service address, phone number, and usage history. I realize that under the rules and regulations of the public utilities commission of Ohio, I may refuse to allow The Dayton Power and Light Company to release the information set forth above. By my signature I freely give the Dayton Power and Light Company permission to release the information designated above.

____________________________________
Customer Name

____________________________________
Customer Signature

____________________________________
Date