

**Solar Payment Option System  
Application for Level 2 Interconnection**



*(Applies to a photovoltaic system with 25 kW – 500 kW DC nameplate capacity  
or a system not meeting Level 1 Interconnection requirements)*

**1) Customer:**

Tracking No. *(provided with notification of Capacity Reservation Date)*: \_\_\_\_\_

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

Company Name *(if applicable)*: \_\_\_\_\_

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

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

Telephone: \_\_\_\_\_ Cell/Evening: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**2) System Installer (must be an Energy Trust Trade Ally):**

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

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

Contractor License No. \_\_\_\_\_ Electrical Supervisor: \_\_\_\_\_

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

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

Office Telephone: \_\_\_\_\_ Cell: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**3) Consulting Engineer (if applicable):**

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

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

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

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

Office Telephone: \_\_\_\_\_ Cell: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**4) Facility Information:**

Existing PGE Account where backfeed will occur *(from PGE bill)*: \_\_\_\_\_

Estimated Commissioning Date: \_\_\_\_\_

Location *(if different from Applicant's address listed above)*:

Street Address: \_\_\_\_\_

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

**5) Estimated Energy Generation:**

*(section does not apply to systems with 100 kW – 500 kW nameplate)*

Systems applying for participation in the Solar Payment Option must be sized to generate 90% or less than existing service’s annual usage. If annual usage is unavailable, it will be estimated by PGE based upon the rolling average of three years’ usage by a similarly situated site.<sup>1</sup>

*Annual kilowatt-hours (kWh) production estimate must use a forecasting methodology consistent with the methodologies used by the Energy Trust of Oregon and the Oregon Department of Energy.*

System Production Estimate (annual): \_\_\_\_\_ kWh

**6) Electric Service Information for Where Solar Facility Will be Interconnected:**

Main Service Entrance Rating: \_\_\_\_\_ Amps

Service Voltage: \_\_\_\_\_ Volts

Type of Service:

Single-Phase     3-Phase Wye     3-Phase Delta

**7) Certified Component Information:**

List interconnection components/system(s) to be used in the Solar Facility that are lab certified by a Nationally Recognized Testing Laboratory (NRTL).

Component/System	NRTL Providing Label & Listing
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____

*Please attach copies of manufacturer brochures or technical specifications.*

<sup>1</sup> The eligible system is limited to 90 percent of the electric site’s previous usage. You can find information about approximate expected generation by visiting the Energy Trust of Oregon web site at <http://energytrust.org/shared-resources/solar-calculator/>. The solar calculator helps you determine how much electricity you can expect to produce, although your Energy Trust Trade Ally will provide a more accurate estimate to complete this application.

**8) Required Facility Information to be Attached:**

- Electrical One-Line Diagram Attached (*showing full circuit from solar panels to existing PGE meter, including new production meter, disconnect, all protective devices, etc.*)
- Site Plan Attached (*documenting PGE meter location, system disconnect location, etc.*)

**9) Solar Facility:**

Generator Nameplate Capacity: \_\_\_\_\_ DC kW (*STC total for all panels*)

***Panel Information:***

Solar Panel Manufacturer: \_\_\_\_\_

Model No. \_\_\_\_\_ Quantity: \_\_\_\_\_

Rated Voltage (*individual unit*): \_\_\_\_\_ Volts

Open Circuit Voltage (*if applicable*): \_\_\_\_\_ Volts

Rated Current (*individual unit*): \_\_\_\_\_ Amps

Short Circuit Current (*if applicable*): \_\_\_\_\_ Amps

***Inverter Information:***

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

Model No. \_\_\_\_\_ Quantity: \_\_\_\_\_

Nameplate Capacity Rated Output: \_\_\_\_\_ Amps \_\_\_\_\_ Volts \_\_\_\_\_ kW

Efficiency: \_\_\_\_\_ % Power Factor: \_\_\_\_\_

***Additional Inverter Information (if more than one model of inverter used):***

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

Model No. \_\_\_\_\_ Quantity: \_\_\_\_\_

Nameplate Capacity Rated Output: \_\_\_\_\_ Amps \_\_\_\_\_ Volts \_\_\_\_\_ kW

Efficiency: \_\_\_\_\_ % Power Factor: \_\_\_\_\_

**10) Customer Consent to Data Release**

I hereby acknowledge and agree that PGE may release information concerning my participation in the Pilot to the Oregon Department of Revenue, the Oregon Department of Energy, the Oregon Public Utility Commission and the Energy Trust of Oregon. PGE shall use reasonable efforts to pursue appropriate confidentiality terms with the above agencies and organizations.

**11) Customer Signature:**

I hereby attest that the information submitted on this application is accurate to the best of my knowledge. I certify that the system is to be constructed from new components and compliant with Oregon Public Utility Commission quality and reliability requirements for photovoltaic systems. I also certify that the system will be first operational and online after July 1, 2010.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title (if applicable): \_\_\_\_\_

*An application fee is required before the application can be processed. Please verify that the appropriate fee is included with the application request form:*

Application fee payable to **Portland General Electric** included.

Amount: \$ \_\_\_\_\_ (*\$50 base plus \$1 per kW of DC Nameplate Capacity*)

**12) Mail Completed Interconnection Application with Application Fee to:**

PGE Solar Payment Option  
PO Box 4079  
Portland, OR 97208-4079

**13) Utility Receipt Acknowledgement:**

Receipt of a completed application is hereby acknowledged.

Approval for a Level 2 Solar Payment Option System interconnection is contingent upon the Applicant’s Generator Facility passing the Level 1 screens and completing the review process set forth in OPUC Rule AR 538, Division 084 and is not granted by the utility’s receipt acknowledgement signature on this Application Form. The Applicant will be notified within fifteen (15) business days of receipt of this acknowledgment whether the interconnection application is approved or denied.

Utility Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

**14) Utility Interconnection Application Approval:**

Utility Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_