

**Standard Interconnection Application Generating Facilities  
with Rated Capacities Greater Than 10 kW but less than 25 kW**

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*This application and interconnection agreement, based on exhibit 1B of the NM Interconnection Handbook, is for grid connected, customer owned generating facilities using certified inverters that are rated greater than 10 kW but less than 25 kW and comply with NMPRC Rule 568. A non-refundable application fee must accompany this application. Attach a \$100 check made payable to Central NM Electric Cooperative (CNMEC) at the time this application is submitted for review in accordance with Rule 568. It is strongly recommended that the applicant obtain CNMEC's approval of the design based upon the information below PRIOR to purchasing any equipment. Signature of customer indicates that they have read and understand this application. Partial applications will not be accepted.*

A Customer-Generator applicant (“Applicant”) hereby makes application to Central New Mexico Electric Cooperative Inc. to install and operate a generating facility with rated capacity greater than 10 kW but less than 25 kW and interconnected within the Cooperative’s utility system. Facilities greater than 25 kW require additional contractual arrangements with the utilities power provider and will be handled on a case by case basis.

Written application should be submitted by mail, email or fax to as follows:

Central NM Electric Cooperative, Inc.  
ATTN: Engineering Manager  
PO Box 669  
Moriarty, NM 87035

Fax Number: (505) 847-1035

E-Mail Address: [net.metering@cnmec.coop](mailto:net.metering@cnmec.coop)

An application is considered complete when it provides all applicable information required below. (Additional information to evaluate a request for interconnection may be required and will be so requested from the Interconnection Applicant by the Utility before the application is deemed to be complete even though it has been submitted).

**SECTION 1) APPLICANT INFORMATION**

Legal Name of Interconnecting Applicant (or, if an Individual, Individual’s Name)

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

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

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

Facility Location (if different from above): \_\_\_\_\_

Telephone (Daytime): \_\_\_\_\_

Telephone (Evening): \_\_\_\_\_

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

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

Existing Account Number: \_\_\_\_\_ (if applicable)

**SECTION 2) GENERATOR FACILITY INFORMATION**

The following applies only to the Generating Facility, not the Interconnection Facilities.

Energy Source:    Solar      Wind      Hydro      Diesel      Natural Gas    Fuel Oil

Other (state type) \_\_\_\_\_

Prime Mover:    PV    Fuel Cell    Recip. Engine    Gas Turbine    Steam Turbine

Microturbine    Other (state type) \_\_\_\_\_

Type of Generator:    Inverter                  Synchronous                  Induction

Generator Nameplate Rating: \_\_\_\_\_ kW, \_\_\_\_\_ kVA

Interconnection Customer or Customer-Site Load: \_\_\_\_\_ kW  
(if none so state)

Typical Reactive Load (if known): \_\_\_\_\_

Maximum Physical Export Capability Requested: \_\_\_\_\_ kW

List certified components of the Generating Facility Equipment Package:

<u>Equipment Type</u>	<u>Certifying Entity</u>
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- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

Is the prime mover compatible with the certified protective relay package?

\_\_\_\_\_ Yes      \_\_\_\_\_ No

Generator (or solar collector) Information:

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

Model Number: \_\_\_\_\_

Nameplate Output Power Rating kW:

(Summer) \_\_\_\_\_; (Winter) \_\_\_\_\_

Nameplate Output Power Rating in kVA:

(Summer) \_\_\_\_\_; (Winter) \_\_\_\_\_

Individual Generator Power Factor

Rated Power Factor: Leading: \_\_\_\_\_ Lagging: \_\_\_\_\_

Total Number of Generators to be interconnected pursuant to this Application: \_\_\_\_\_

Elevation: \_\_\_\_\_  Single phase  Three phase

Inverter Information (if used):

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

Model Number: \_\_\_\_\_

Nameplate Output Power Rating kW: \_\_\_\_\_

Please include a list of adjustable set points for the protective equipment or software associated with the equipment being proposed for this installation. Feel free to attach a print out or listing of the settings from the manufacturer.

**Note:** A completed Power Systems Load Flow data sheet must be supplied with the Interconnection Application.

Generating Facility Characteristic Data (for inverter-based machines):

Max design fault contribution current: \_\_\_\_\_

Instantaneous or RMS: \_\_\_\_\_

Harmonics Characteristics: \_\_\_\_\_

Start-up requirements: \_\_\_\_\_

Note: Please contact the Utility prior to submitting the Interconnection Application to determine if the specified information above is required.

**SECTION 3) INTERCONNECTION FACILITES INFORMATION**

Will a transformer be used between the generator and the Point of Common Coupling:  
 Yes  No

Interconnecting Circuit Breaker (if applicable):

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

Load Rating (Amps): \_\_\_\_\_ Interrupting Rating (Amps): \_\_\_\_\_

Trip Speed (Cycles): \_\_\_\_\_

Interconnection Protective Relays (if applicable):

If Microprocessor-Controlled:

List of Functions and Adjustable Setpoints for the protective equipment or software:

	<u>Setpoint</u>	<u>Minimum</u>	<u>Maximum</u>
1.			
2.			
3.			
4.			
5.			
6.			

If Discrete Components:

(Enclose Copy of any Proposed Time-Overcurrent Coordination Curves)

Manufacturer:            Type:            Style/Catalog No.:            Proposed Setting:

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

**SECTION 4) GENERAL INFORMATION**

Enclose a copy of site electrical one-line diagram showing the configuration of all Generating Facility Equipment, current and potential circuits, and protection and control schemes. Note that this one-line diagram must be signed and stamped by a licensed Professional Engineer if the Generating Facility is larger than 50kW.

Is One-Line Diagram Enclosed?        \_\_\_\_\_ Yes        \_\_\_\_\_ No

Enclose a copy of any site documentation that indicates the approximate physical location for the proposed Generating Facility (e.g., USGS topographics map or other property diagram as needed to convey the location of the facilities).

Is Site Diagram Enclosed?            \_\_\_\_\_ Yes            \_\_\_\_\_ No

Proposed location of protective interface equipment on property (include address if different from the Interconnection Customer's address)

\_\_\_\_\_

Enclose copy of any site documentation that describes and details the operation of the protection and control schemes.

Is Available Documentation Enclosed?        \_\_\_\_\_ Yes        \_\_\_\_\_ No

Enclose copies of schematic drawings for all protection and control circuits, relay current circuits, relay potential circuits, and alarm/monitoring circuits (if applicable)

Are Schematic Drawings Enclosed? \_\_\_\_\_ Yes \_\_\_\_\_ No

Enclose copies of manufacturer brochures or catalog cut sheets for generation and inverter equipment being proposed.

Are Manufacturer Cut Sheets Enclosed? \_\_\_\_\_ Yes \_\_\_\_\_ No

**SECTION 5) APPLICANT SIGNATURE**

I hereby certify that, to the best of my knowledge, all the information provided in the Interconnection Application is true and correct. Generating systems must be compliant with IEEE, NEC, ANSI and UL standards where applicable. By signing below, the Applicant also certifies that the installed generating equipment meets the appropriate preceding requirement(s) and can supply documentation that confirms compliance.

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

**SECTION 6) PHYSICAL INTERCONNECTION INFORMATION**

(Not required as part of the application, unless available at time of application.)

Installed by: Company \_\_\_\_\_ Contact Person: \_\_\_\_\_

Qualifications/Credentials: \_\_\_\_\_

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

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

Daytime Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Proposed Installation Date: \_\_\_\_\_ Proposed Completion Date: \_\_\_\_\_