

HALTON HILLS HYDRO INC.
Connection Review Application Form



Application for Preliminary Review of Distributed Generation to be located within Halton Hills Hydro's Distribution System and connected to the Distribution System.

1. Applicant's Contact Information (the party that will be contractually obligated for this generating facility)

Name _____
Company _____
(if any) _____
Mailing Address _____
Phone Number (Main) _____ Cell _____
Fax Number _____ Email _____

2. Location of Interest for Distribution Generation

Street Address or _____
Closest Location _____
Description _____

3. Generator Information

Generation Type: (Check One) Synchronous Induction Inverter
 Other: _____

Number of Phases: (Check One) Single Phase Three Phase

Primary Energy Source: Renewable: _____ Non Renewable _____
Type: _____

Do you intend to participate in any OPA programs? Yes No
Details: _____

Output capacity: _____ kW

Load displacement? Yes No Net Metering Program? Yes No
(If Yes is this Existing or New Load?) _____

OPA microFIT/ FIT Program & Contract No.: _____

4. Other Information that may be relevant or assist in preliminary review

*** Return this form to Halton Hills Hydro Inc., Engineering Department***