



Town of Clayton
Generation Interconnection Application
Short Form
(For Use with Generators 25 kW or Less)

The Applicant submits this Interconnection Application to Town of Clayton to install and operate a generating facility of 25 kW or less interconnected with the Town of Clayton electric distribution system.

Section 1 – Applicant Information

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Facility Location (if different from above): _____

Phone Number: Daytime _____

Evening _____

Town of Clayton Account Number: _____

Section 2 – Generator Qualifications

Is generator powered from a Renewable Net Energy Metering (NEM) Qualifying Energy Source?

Yes No

Type NEM Qualifying Energy Source (if applicable):

Solar Wind Other, specify

Does Applicant request NEM service? Yes No

Solar PV modules Manufacturer, Model Name, and Model Number:

(Attach a copy of the manufacturer's specification sheet(s).)

Total DC output power rating in kW: _____(DC)

Inverter Manufacturer, Model Name, and Model Number (if used):

(Attach a copy of the manufacturer's specification sheet(s).)

Total AC output rating in kW: _____(AC)

Type and Model Number of AC Safety Disconnect Switch to be installed:

(Attach a copy of the manufacturer's specification sheet(s).)

Will a generator disconnect device be installed, accessible to the local utility and in line of sight to the utility meter?

Yes No

Section 3 – Generator / Equipment Certification

Generating systems that use / utilize inverter technology must be compliant with the IEEE 1547 and Underwriter Lab UL 1741 and comply with the Town of Clayton's *Technical Considerations Covering Parallel Operations of Customer-Owned Generation of 500 KW or Less and Interconnected with the Town of Clayton Electric System* document. By signing below, the applicant certifies that the installed generating equipment meets the appropriate preceding requirement(s) and can supply documentation that confirms compliance.

Applicant's Signature

Date

Section 4 – Installation Details

Generating system will be installed by: Owner Delaware Licensed Electrician

Installing Electrician: _____

Firm Name: _____

License Number of Installing Electrician: _____

Mailing Address:

Phone Number of Installing Electrician (including area code): _____

Installation Date: _____

Requested Interconnection Date: _____

Applicant is to supply final electrical inspection certification that the generation system has been installed and inspected in compliance with the local building / electrical code prior to interconnection.

Applicant to receive and review an Attachment A, "List of Items" to be supplied and submitted for technical review of Interconnection Application.

List received? Yes No

Items provided? Yes No

Section 5 – Applicant Signature

Applicant's Signature

Date

Send the completed application to:

Town of Clayton
P.O. Box 1130
Clayton, DE 19938-1130

(Internal Use Only)

Section 6 – Approval or Non-Approval

Planning & Zoning Review	<input type="checkbox"/> Approved	<input type="checkbox"/> Not Approved
Electrical Review	<input type="checkbox"/> Approved	<input type="checkbox"/> Not Approved
Town Compliance	<input type="checkbox"/> Approved	<input type="checkbox"/> Not Approved

Town Official Printed Name: _____

Signature: _____ Date: _____

Reason for Non-Approval:

Approval to connect to the Town of Clayton electric system indicates only that the minimum requirements for a safe and proper interconnection has been satisfied. Such approval does not imply that the Generator Owner's facility meets all federal, state, and local standards or regulations.

Witness Test is required and all fees paid by Applicant prior to final approval and interconnection.

Section 7 – Internal Notifications

		Date
Applicant warning label for installing on / near service meter and AC Safety Disconnect Switch	<input type="checkbox"/> Yes	_____
Notify Billing Department of interconnected generation	<input type="checkbox"/> Yes	_____
Notify Electric Department of interconnected generation	<input type="checkbox"/> Yes	_____
Application fee paid	<input type="checkbox"/> Yes	_____
Notify Town Engineer of interconnected generation	<input type="checkbox"/> Yes	_____
DEMEC notified	<input type="checkbox"/> Yes	_____
Copy of Final Inspection Certificate received	<input type="checkbox"/> Yes	_____
Witness Test completed by Applicant with Town	<input type="checkbox"/> Yes	_____
Final approval notice sent to Applicant	<input type="checkbox"/> Yes	_____

**ATTACHMENT A
LIST OF ITEMS**

**TOWN OF CLAYTON
REVIEW OF PV SOLAR INTERCONNECTION APPLICATION
ITEMS TO BE SUBMITTED WITH INTERCONNECTION APPLICATION**

1. Site Plan: Including buildings and property fixtures; show layout of PV solar facility, utility meter location, and location of AC Safety Disconnect Switch.
2. Structural Details: For roof mounted PV solar facility only.
3. Cut Sheets for:
 - a. Inverter – must be IEEE 1547 compliant
 - b. AC Safety Disconnect Switch – must be “visible break” with “lockout” & “tagout” compliance
 - c. PV solar modules
4. Electrical Three-Line Diagram
5. Solar Lease Agreement (if applicable)
6. Warning Signage Verbiage (to be installed at AC Safety Disconnect Switch)
7. Requested Date of Interconnection