



# Application for Operation of Member-Owned Generation

**This application should be completed as soon as possible and returned to Egyptian Electric Cooperative’s Engineering Department in order to begin processing the request. See Member Guidelines for Electric Power Generator Installation and Interconnection for additional information.**

*INFORMATION: This application is used by the Cooperative to determine the required equipment configuration for the Memberr interface. Every effort should be made to supply as much information as possible.*



## PART 1 OWNER/APPLICANT INFORMATION

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

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

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

Phone Number: \_\_\_\_\_ Representative: \_\_\_\_\_



## PROJECT DESIGN/ENGINEERING (ARCHITECT) (as applicable)

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

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

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

Phone Number: \_\_\_\_\_ Representative: \_\_\_\_\_



## ELECTRICAL CONTRACTOR (as applicable)

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

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

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

Phone Number: \_\_\_\_\_ Representative: \_\_\_\_\_



## TYPE OF GENERATOR (as applicable)

Photovoltaic \_\_\_\_\_ Wind \_\_\_\_\_ Microturbine \_\_\_\_\_

Diesel Engine \_\_\_\_\_ Gas Engine \_\_\_\_\_ Turbine \_\_\_\_\_

Other \_\_\_\_\_



## ESTIMATED LOAD, GENERATOR RATING AND MODE OF OPERATION INFORMATION

The following information will be used to help properly design the Cooperative member interconnection. This information is not intended as a commitment or contract for billing purposes.

Total Site Load \_\_\_\_\_ (kW)

Residential \_\_\_\_\_ Commercial \_\_\_\_\_ Industrial \_\_\_\_\_

Generator Rating \_\_\_\_\_ (kW) Annual Estimated Generation \_\_\_\_\_ (kWh)

### Mode of Operation

Isolated \_\_\_\_\_ Paralleling \_\_\_\_\_ Power Export \_\_\_\_\_

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## DESCRIPTION OF PROPOSED INSTALLATION AND OPERATION

Give a general description of the proposed installation, including a detailed description of its planned location and when you plan to operate the generator.

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## PART 2

(Complete all applicable items. Copy this page as required for additional generators)

### SYNCHRONOUS GENERATOR DATA

Unit Number: \_\_\_\_\_ Total number of units with listed specifications on site: \_\_\_\_\_

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

Type: \_\_\_\_\_ Date of manufacture: \_\_\_\_\_

Serial Number (each): \_\_\_\_\_

Phases: Single Three R.P.M.: \_\_\_\_\_ Frequency (Hz): \_\_\_\_\_

Rated Output (for one unit): \_\_\_\_\_ Kilowatt \_\_\_\_\_ Kilovolt-Ampere

Rated Power Factor (%): \_\_\_\_\_ Rated Voltage (Volts): \_\_\_\_\_ Rated Amperes: \_\_\_\_\_

Field Volts: \_\_\_\_\_ Field Amps: \_\_\_\_\_ Motoring power (kW): \_\_\_\_\_

Synchronous Reactance (Xd): \_\_\_\_\_ % on \_\_\_\_\_ KVA base

Transient Reactance (X'd): \_\_\_\_\_ % on \_\_\_\_\_ KVA base

Subtransient Reactance (X''d): \_\_\_\_\_ % on \_\_\_\_\_ KVA base

Negative Sequence Reactance (Xs): \_\_\_\_\_ % on \_\_\_\_\_ KVA base

Zero Sequence Reactance (Xo): \_\_\_\_\_ % on \_\_\_\_\_ KVA base

Neutral Grounding Resistor (if applicable): \_\_\_\_\_

$I_2^2t$  or K (heating time constant): \_\_\_\_\_

Additional information: \_\_\_\_\_



Control Voltage (Closing): \_\_\_\_\_ (Volts) AC DC  
 Control Voltage (Tripping): \_\_\_\_\_ (Volts) AC DC Battery Charged Capacitor  
 Close energy: Spring Motor Hydraulic Pneumatic Other: \_\_\_\_\_  
 Trip energy: Spring Motor Hydraulic Pneumatic Other: \_\_\_\_\_  
 Bushing Current Transformers: \_\_\_\_\_ (Max. ratio) Relay Accuracy Class: \_\_\_\_\_  
 Multi ratio? No Yes: (Available taps) \_\_\_\_\_

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**ADDITIONAL INFORMATION**

*In addition to the items listed above, please attach a detailed one-line diagram of the proposed facility, all applicable elementary diagrams, major equipment, (generators, transformers, inverters, circuit breakers, protective relays, etc.) specifications, test reports, etc., and any other applicable drawings or documents necessary for the proper design of the interconnection. Also describe the project's planned operating mode (e.g., combined heat and power, peak shaving, etc.), and its address or grid coordinates.*

**END OF PART 2**

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**SIGN OFF AREA**

The Member agrees to provide the Cooperative with any additional information required to complete the interconnection. The Member shall operate equipment within the guidelines set forth by the Cooperative.

\_\_\_\_\_  
 Applicant Date

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**EGYPTIAN ELECTRIC COOPERATIVE  
 CONTACT FOR APPLICATION SUBMISSION AND FOR MORE INFORMATION:**

Cooperative contact: Manager of Engineering  
 Address: 10169 Old Highway 13  
 Murphysboro, Il 62966

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 Phone: 618-684-2143  
 Fax: 618-965-3111

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