Received: 03/29/2012

Status: CANCELLED Effective Date: 04/01/2012

LEAF: 320 REVISION: 4

PSC 220 ELECTRICITY NIAGARA MOHAWK POWER CORPORATION INITIAL EFFECTIVE DATE: APRIL 1, 2012

SUPERSEDING REVISION: 3

STAMPS: Issued in Compliance with Order issued March 16, 2012 in Case No. 11-E-0321.

NEW YORK STATE STANDARIZED APPLICATION FOR SINGLE PHASE ATTACHMENT OF PARALLEL GENERATION EQUIPMENT 25 KW OR LESS TO THE ELECTRIC SYSTEM OF NIAGARA MOHAWK POWER CORPORATION D/B/A NATIONAL GRID

| Customer: | Phone: () | |
|--|---------------------------------------|------|
| Name: | Fax: () | |
| | Email: | |
| Address: | Municipality: | |
| Utility Account Number: | | |
| Agent (if any): | | |
| Name: | Phone: () | |
| | Fax: () | |
| | Email: | |
| Address: | Municipality: | |
| Consulting Engineer or Contractor: | | |
| Name: | Phone: () | |
| Address: | 1 110110. (| |
| | | |
| Estimated In-Service Date: | | |
| Existing Electric Service: | | |
| Capacity:Amperes Vo | oltage: Volts | |
| Service Character: ()Single Phase () | | |
| | | |
| Location of Protective Interface Equipment_o (include address if different from customer addre | | |
| | | |
| Energy Producing Equipment/Inverter_Inform | nation: | |
| Manufacturer: | | |
| Model No Versio | n No. | |
| ()Synchronous ()Induction ()Invert | | |
| Rating:kW Rating: _ | $k\overline{VA}$ | |
| Generator Connection: ()Delta ()Wy | | |
| Interconnection Voltage:V | | |
| System Type Tested (Total System): (|)Yes ()No; attach product literature | |
| Equipment Type Tested (i.e. Inverter, P | | |
| ()Yes ()No; attach product l | | |
| Three line Diagram attached: ()Yes | | |
| Installation Test Plan attached: ()Yes | | |
| If applicable, Certification to UL 1741 | attached: ()Yes | |
| Signature: | | |
| CUSTOMER/AGENT SIGNATURE | TITLE | DATE |