Attachment B to Section 30.14, Appendix 2 - Interconnection Facilities Study Agreement

DATA FORM TO BE PROVIDED BY DEVELOPER

WITH THE INTERCONNECTION FACILITIES STUDY AGREEMENT

1. Provide location plan and simplified one-line diagram of the plant and station facilities. For staged projects, please indicate future generation, transmission circuits, etc.

2. Finalize and specify your Interconnection Service evaluation election for the Class Year Interconnection Facilities Study. Developer should specify either Energy Resource Interconnection Service ("ERIS") alone, both ERIS and some MW level of Capacity Resource Interconnection Service ("CRIS") or CRIS only (*e.g.*, if your facility is already interconnected taking only ERIS, you may elect to be evaluated for CRIS only); provided however, that CRIS requests are subject to the limits specified in Section 25.8.1 of Attachment S to the ISO OATT. Evaluation election:

   ERIS: _____

   CRIS: _____ (For a Resource with Energy Duration Limitations that is requesting CRIS, indicate the maximum injection capability over the selected duration (*e.g.*, 10 MWh over 4 hours)

3. Proposed Schedule:

Begin Construction	Date: _____
In-Service	Date: _____
Initial Synchronization	Date: _____
Generation Testing	Date: _____
Commercial Operation	Date: _____

4. Additional Information Required as Part of this Data Form:

   All facilities, including BTM:NG Resources, ~~Energy Storage Resources,~~Resources with Energy Duration Limitations, and Small Generating Facilities comprised of multiple units of the same or different technology type, and Class Year Transmission Projects, must also complete Section A, below.

A. Additional Information:

Nameplate MW: _____

Nameplate MVA: _____

Auxiliary Load: _____

For temperature sensitive units, provide MW vs. temp curves and indicate maximum summer and winter net capability below:

- Maximum summer net (net MW = gross MW minus auxiliary loads total MW) which can be achieved at 90 degrees F: _____
- Maximum winter net (net MW = gross MW minus auxiliary loads total MW) which can be achieved at 10 degrees F : _____

1. One set of metering is required for each generation connection to the new ring bus or existing Connecting Transmission Owner station. Number of generation connections: ___ _____
2. On the one-line indicate the generation capacity attached at each metering location. (Maximum load on CT/PT)
3. On the one-line indicate the location of auxiliary power. (Minimum load on CT/PT) Amps
4. Will an alternate source of auxiliary power be available during CT/PT maintenance? _____ Yes _____ No
5. Will a transfer bus on the generation side of the metering require that each meter set be designed for the total plant generation? _____ Yes _____ No

   (If yes, indicate on one-line diagram).
6. What type of control system or PLC will be located at the Developer's facility?

_____

7. What protocol does the control system or PLC use?

_____

8. Please provide a 7.5-minute quadrangle of the site. Sketch the plant, station, transmission line, and property line.

_____

9. Physical dimensions of the proposed interconnection station:

_____

10. Bus length from generation to interconnection station:

_____

11. Line length from interconnection station to Connecting Transmission Owner's transmission line.

_____

12. Tower number observed in the field. (Painted on tower leg):

_____

13. Number of third-party easements required for transmission lines, if known:

_____

BTM:NG Resources

14. In addition to the above information, as applicable, for BTM:NG Resources, please also provide the following information:

Interconnection Customer or Customer-Site Load:_____kW (if none, so state)

Existing load? Yes ___ No___

If existing load with metered load data, provide coincident Summer peak load: _____

If new load or existing load without metered load data, provide estimated coincident Summer peak load: _____

Is the new load or existing load in the Transmission Owner's service area?

_____ Yes _____No Local provider: _____

~~Energy Storage Resources~~Resources with Energy Duration Limitations

15. In addition to the above information, as applicable, for ~~Energy Storage Resources~~Resources with Energy Duration Limitations, please also provide the following information:

Energy storage capability (MWh): _____

Minimum Duration for full discharge (*i.e.*, injection) (Hours): _____

Minimum Duration for full charge (*i.e.*, withdrawal) (Hours): _____

Maximum withdrawal from the system (*i.e.*, when charging) (MW):_____

Inverter manufacturer, model name, number, and version: _____

_____

Maximum sustained ~~one hour~~ injection (in MW) ~~hours~~ over the Developer-selected duration; ***[incremental revisions make this language consistent with same data requested in Att. Z, Section 32.5, Appx. 2]***

Primary frequency response operating range ~~for electric storage resource~~: _____

Minimum State of Charge: _____(%)___ Maximum State of Charge:_____ (%)

If requesting CRIS, indicate the maximum injection capability over the selected duration (*e.g.*, 2.5 MW over 4 hours for a total of 10 MWh): _____
[moved from Att. Z, Section 32.5, Appx. 2]

Small Generating Facilities Comprised of Multiple Units of the Same or Different Technology Type

In addition to the above information, as applicable, for Small Generating Facilities comprised of multiple units of the same or different technology type, please also provide the following information:

a. Describe the composition of assets (including MW level) within the Small Generating Facility, including load reduction assets (*e.g.*, 5 MW wind facility, 2 MW Energy Storage Resource and a load reduction resource with a maximum of 1 MW of load reduction):

_____

_____

b. Maximum Injection Capability of entire Small Generating Facility over 1 hour: ___

c. If the Small Generating Facility includes a Resource with Energy Duration Limitations and is requesting CRIS, indicate the maximum injection capability for the entire Small Generating Facility over the selected duration (*e.g.*, 10 MWh over 4 hours): _____

_____

_____

d. Provide the following information for each unit within the Small Generating Facility (if unchanged from the information provided with the Small Generator Interconnection Request form, as applicable, indicate "No Change":

Energy Source: Solar Wind Hydro Hydro Type (e.g. Run-of-River): _____
Diesel ___Natural Gas ___Fuel Oil ___ Other (state type) _____

Prime Mover: ___Fuel Cell ___Recip Engine ___Gas Turb ___Steam Turb
___Microturbine ___PV ___Other

Type of Generator: Synchronous Induction Inverter

Generator Nameplate Rating: kW (Typical) Generator Nameplate kVAR: _____

If solar array, fixed, 1-axis, 2-axis, 2-axis flat panel, 2-axis CPV, CSP, etc.): _____

Interconnection Customer or Customer-Site Load: _____kW (if none, so state)

Existing load? Yes ___ No___

If existing load with metered load data, provide coincident Summer peak load: _____

If new load or existing load without metered load data, provide estimated coincident Summer peak load, together with supporting documentation for such estimated value:
_____

Typical Reactive Load (if known): _____

Maximum Physical Export Capability Requested: kW

List components of the Small Generating Facility equipment package that are currently certified:

Equipment Type	Certifying Entity
1.	
2.	
3.	
4.	
5.	

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

Generator (or solar collector)
Manufacturer, Model Name & Number: _____
Version Number: _____

Nameplate Output Power Rating in kW: (Summer) (Winter) _____
Nameplate Output Power Rating in kVA: (Summer) (Winter) _____

Individual Generator Reactive Capability in kVAR
Leading: _____ Lagging: _____

If wind, total number of generators in wind farm to be interconnected pursuant to this Interconnection Request: _____
Generator Height: _____ ___Single phase _____ ___Three Phase

If a Resource with Energy Duration Limitations:

Inverter manufacturer, model name, number, and version: _____

_____

Energy storage capability (MWh): _____
Minimum Duration for full discharge (*i.e.*, injection) (Hours): _____
Minimum Duration for full charge (*i.e.*, withdrawal) (Hours): _____
Maximum withdrawal from the system (*i.e.*, when charging) (MW): _____
Maximum sustained one-hour injection in MW hours; _____
Primary frequency response operating range: _____
Minimum State of Charge: _____ (%) Maximum State of Charge: _____ (%)