## **Application for Interconnection and Net Metering**

Use this application form only for a generating facility that is inverter based and certified by a nationally recognized testing laboratory to meet the requirements of UL1741

Submit this Application to: Blue Grass Energy, P.O. Box 990, Nicholasville KY 40340

If you have questions regarding this Application or its status, contact the Cooperative at: 859-885-4191

Member Name:	Account Number:				
Member Address:					
Member Phone No.:	Member E-Mail Address:				
Project Contact Person:					
Phone No.:	Err	Email Address (Optional):			
Provide names and contact i the design and installation o			s, installers, or er	ngineering firms involved in	
Energy Source: Solar	Wind 🗆	Hydro 🗆	Biogas 🗆	Biomass 🗆	
Inverter Manufacturer and M	Vodel #:				
Inverter Power Rating:		Inverter V	oltage Rating:		
Power Rating of Energy Sour	rce (i.e., solar pa	nels, wind turbir	ne):		
Is Battery Storage Used:	No 🗆 Yes If Y	es, Battery Powe	er Rating:		
Attach documentation show meet the requirements of U	-	r is certified by a	nationally recog	nized testing laboratory to	
Attach site drawing or sketch accessible disconnect switch	-	on of Cooperativ	re's meter, energ	y source, Cooperative	
Attach single line drawing sh the energy source including wire size, equipment ratings	switches, fuses,	breakers, panels	•	-	
Expected Start-up Date:					