



An AEP Company  
BOUNDLESS ENERGY™

**APPLICATION FOR INTERCONNECTION**  
**LEVEL 1 - INVERTER BASED GENERATION EQUIPMENT**  
**(10 KW OR SMALLER)**  
**STATE OF INDIANA SERVICE AREA**

*An Application is a complete application when it provides all applicable and correct information required below. Additional information to evaluate a request for interconnection may be required pursuant to the application process after the Application is deemed complete.*

Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_

**Service Location**

Street Address: \_\_\_\_\_ City: \_\_\_\_\_

Electric Service Account Number: \_\_\_\_\_

Existing Electric Service: Capacity: \_\_\_\_\_ Amps Voltage: \_\_\_\_\_ Volts

Service Character: ( ) Single Phase ( ) Three Phase

**Consulting Engineer or Contractor**

Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_

**Energy Producing Equipment/Inverter Information**

( ) Solar ( ) Wind ( ) Other (specify): \_\_\_\_\_

Generator Manufacturer & Model No's: \_\_\_\_\_

Ratings: \_\_\_\_\_ kW \_\_\_\_\_ Volts No. of Generator Units \_\_\_\_\_

Inverter Manufacturer & Model No's: \_\_\_\_\_

Ratings: \_\_\_\_\_ kW \_\_\_\_\_ kVA \_\_\_\_\_ Volts No. of Inverter Units: \_\_\_\_\_

Location of Utility Accessible Lockable Disconnect Switch: \_\_\_\_\_

(e.g. West wall next to utility meter)

Estimated In-Service Date: \_\_\_\_\_

- Attach documentation/product literature confirming that a nationally recognized testing and certification lab has listed the equipment.
- Attach “Certificate of Liability Insurance”
- Attach electrical one-line diagram. (sample below)
- Attach site diagram showing location of disconnect switch, electric meter, and protective interface equipment. (sample below)

I hereby certify that, to the best of my knowledge, all of the information provided in this application is true and correct.

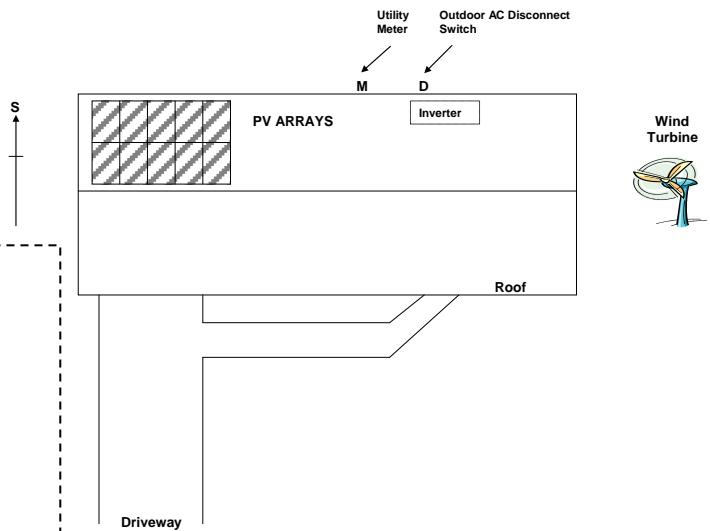
\_\_\_\_\_  
**APPLICANT’S SIGNATURE**

\_\_\_\_\_  
**TITLE**

\_\_\_\_\_  
**DATE**

Return Completed Application to: *Shari Konger*  
*Indiana Michigan Power*  
*PO Box 60*  
*Fort Wayne IN 46801-0060*  
*260-408-3402, 260-408-3558 (fax)*  
[DGCoordinator\\_I&M@aep.com](mailto:DGCoordinator_I&M@aep.com)

Sample Site Diagram



Sample Electrical One-line Diagram

