

# PUC Chapter 313 – Customer Net Energy Billing Agreement Application

This Application is considered complete when it provides all applicable and correct information required below. Additional information to evaluate the Application may be required.

## 1. Net Metering Customer

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

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

City, State, Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Facility Account No.: \_\_\_\_\_

Facility Service Address: \_\_\_\_\_

(include # & street address, city, county, state, zip code)

Facility Size: AC kW: \_\_\_\_\_

Facility Fuel Type: \_\_\_\_\_

Is the Generating Facility paired with a Battery Energy Storage System (yes or no): \_\_\_\_\_

If yes, is the Battery Energy Storage System AC coupled or DC coupled: \_\_\_\_\_

Anticipated In-Service Date: \_\_\_\_\_

2. Credit Type kWh Credit \_\_\_\_\_ Tariff Rate Credit (C&I only) \_\_\_\_\_ (check only one)

For Tariff Rate application, I certify that 100% of the facility's output is subscribed to by customers collocated with the facility. \_\_\_\_\_

## 3. Ownership & Allocation Type

Single Ownership: \_\_\_\_\_ Single Ownership Multi-Account: \_\_\_\_\_ Shared Financial Interest: \_\_\_\_\_  
(check only one)

A. Single Ownership: Please sign at the bottom of the application and submit as requested.

B. Single Ownership Multi-account or Shared Financial Interest select allocation type below

Allocation Type: Cascading: \_\_\_\_\_ or Percentage Allocation: \_\_\_\_\_ (check only one)

## 4. Contact Person

Shared Financial Interest and Tariff Rate Crediting Agreements must select a single individual who is responsible for requesting, executing and complying with the provisions of the net energy billing agreement. Please fill in the following section and attach the required additional information required.

Contact

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

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

\_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

Additional information needed.

- Provide documentation and certify that each shared financial interest (kWh or financial) customer has a valid financial interest in the shared facility. Examples include an ownership agreement, a lease agreement, power purchase agreement, or an affidavit from the project sponsor certifying that each customer has a financial interest which meets the requirements of Chapter 313, including a description of the type of financial interest.
- Provide a list of owner names, account numbers and percentage allocations (see section 5).

5. In Attachment 1, please provide customer data for each customer with a financial interest.

**Multiple Account List**

List accounts below in which excess energy will be allocated. If Cascading is chosen above, then no allocation % need to be identified. Please list the order in which you wish credits to be applied. The facility account must be listed in either type agreement. If Percentage Allocation is chosen the sum of the percentages must equal 100%. With Single Ownership agreements all account names need to be in the same name prior to the In-Service date of the facility. Note, if the accounts are unknown at the time the application is filed, a final list must be provided a minimum of 60 days prior to the Commercial Operation Date of the Facility.

Account Number/Allocation %	Account Number/Allocation %
1. _____	6. _____
2. _____	7. _____
3. _____	8. _____
4. _____	9. _____
5. _____	10. _____

If more than 10 accounts are required, please create an MS-Excel spreadsheet and submit with this application. Please include Customer Name, Account number and Allocation (cascading 1,2,3... or Percentage x.xxxxx%). Percent allocation is limited to 6 decimal places and must sum to 100%.

**Customer Net Energy Billing - Customer Signature and Affidavit**

I hereby certify that the information provided in this Application is true and accurate. I agree to abide by the terms and conditions for a facility no larger than .999 MW<sub>AC</sub>, when the Small Generating Facility has been installed and have met all the qualification requirements of Chapter 313.

If the Facility is coupled with a Battery Energy Storage System, I affirm that controls are or will be put in place to prevent the battery from being charged from the grid, or if the battery is capable of charging from the grid, controls are in place, or will be put in place, which would prevent the battery from discharging energy to the grid.

For Tariff Rate application, I certify that 100% of the facility's output is subscribed to by customers collocated with the facility.

Signed: \_\_\_\_\_  
Title: \_\_\_\_\_ Date: \_\_\_\_\_

**Additional Requirement**

- At the conclusion of the installation process a Certificate of Completion must be completed and received by Central Maine Power. This form can be found with the Chapter 324 Forms and Agreements at [cmpco.com](http://cmpco.com) under Smart Energy\Interconnections.

**Please return Net Metering Application to the address listed below. If it is more convenient you may email the application to [ppaadmin@cmpco.com](mailto:ppaadmin@cmpco.com) or fax to (207) 629-2193. Any question please call either Renée Hachey at (207) 629-2108, Anna Karlsson at (207) 629-2189, Justin Ouellette at (585) 484-2828, Amy Lapierre at (207) 629-2167, Andrew Jackson at (207)629-2183 or Oscar Miranda (207)629-2181.**

**Central Maine Power Company  
Attention: Electric Supply  
83 Edison Drive  
Augusta, ME 04336**

**Attachment 1 – Shared Financial Interest Customer Data**

Please provide customer specific data for each customer having a shared financial interest in the facility.

1.	Name	_____
	Account No.	_____
	Mailing Address	_____
	Telephone	_____
2.	Name	_____
	Account No.	_____
	Mailing Address	_____
	Telephone	_____
3.	Name	_____
	Account No.	_____
	Mailing Address	_____
	Telephone	_____
4.	Name	_____
	Account No.	_____
	Mailing Address	_____
	Telephone	_____
5.	Name	_____
	Account No.	_____
	Mailing Address	_____
	Telephone	_____
6.	Name	_____
	Account No.	_____
	Mailing Address	_____
	Telephone	_____
7.	Name	_____
	Account No.	_____
	Mailing Address	_____
	Telephone	_____
8.	Name	_____
	Account No.	_____
	Mailing Address	_____
	Telephone	_____
9.	Name	_____
	Account No.	_____
	Mailing Address	_____
	Telephone	_____
10.	Name	_____
	Account No.	_____
	Mailing Address	_____
	Telephone	_____

If more than 10 accounts are included, please create an Excel spreadsheet and submit with this application.