**Preliminary Consultation Information Request**

**Distributed Energy Resource (DER) Connections**

This form is for customers applying for a Preliminary Assessment for connecting a Distributed Energy Resource (DER). All fields are required. Email the completed form to [DER@LDC.ca](mailto:DER@LDC.ca) If you have any questions, you may send them to the email or phone 555-999-9999.

| 1. **General Information:** | |
| --- | --- |
| **Project Name:** Click or tap here to enter text. | |
| **Application Submission Date:** Click or tap to enter a date.(YYY/MM/DD) | |
|  | |
| **Primary Contact:** Click or tap here to enter text.  *(company name)*  **Contact Name:** Click or tap here to enter text. |  |
| **Telephone No.:** Click or tap here to enter text. |  |
| **E-mail Address:** Click or tap here to enter text. |  |
| **Address:** Click or tap here to enter text. **City/Town:** Click or tap here to enter text.  **Postal Code:** Click or tap here to enter text. | |

1. **Project Information:**

|  |  |  |
| --- | --- | --- |
| **Project Intent**: | Inject energy to the grid under the program:  Do not inject energy to the grid for:  Load Displacement   Emergency Backup only when the grid is not available    Other (please specify): Click or tap here to enter text. | |
| **Size:** | Proposed Installed Capacity | Click or tap here to enter text.kW |
| Connecting on | Single phase  3 phase |
| **Project Type**: | DER Type | Synchronous Other *(please specify*):  Induction Click or tap here to enter text.  Inverter based |
|  | DER Fuel/Energy Type | Click or tap here to enter text. |
| **Site Information** | Municipal Address | Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  City/Town/Township\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Postal Code\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Existing Account number (if applicable) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |
| --- |
| **For office use only:**  Received Date:Click or tap to enter a date. (YYY/MM/DD)  Incomplete returned Date: Click or tap to enter a date. (YYY/MM/DD)  Complete Date: Click or tap to enter a date. (YYY/MM/DD)  Form A Report sent Date: Click or tap to enter a date. (YYY/MM/DD)  Application ID assigned ID: Click or tap here to enter text. |