# Example: A 100 kW rooftop solar project under the net-metering program

#### Distributed Energy Resource (DER) Connection

#### **Distributor: ERTH POWER CORPORATION**

#### **Preliminary Consultation Information Request (PCIR)**

OEB Template Version 2

Distributor Template Version

#### 1. Instruction

The Applicant should only proceed with this form if the proposed DER project meets the following conditions:

- a) Has a capacity larger than 10kW (AC).
- b) Not a sole emergency backup generator during a power interruption to the distribution system.

For a micro DER project with a capacity size of 10kW or less, please review the Local Distribution Company (Distributor)'s website for application process.

The Applicant should complete the latest version of the PCIR form, and submit the form per the instruction provided on the Distributor's website. All fields are required, unless otherwise noted, to enable the preliminary connection assessment. The Applicant does not need to commit to any information provided in the PCIR. Changes can be made when applying for a Connection Impact Assessment (CIA). Please note that the preliminary consultation process does not consider the full range of technical evaluations that would be performed through a CIA. The PCR provides additional information on the potential complexity of the connection of the proposed DER. Capacity is not reserved upon completion of a Preliminary Consultation Report (PCR).

Please check the Independent Electricity System Operator (IESO)'s website for information on the System Impact Assessment if the Applicant plans to provide ancillary services.

All kW capacity information in this form should be in AC.

2. Distributor Contact Information							
2.01	Contact Information						
	A. Distributor Name	-	ERTH POWER CORPORATION	Pre-populated by Distributor			
	B. Department Name	-	DER CONNECTIONS	Pre-populated by Distributor			
	C. Department Address	-	143 BELL STREET, PO BOX 157	Pre-populated by Distributor			
	D. Department City & Postal Code	-	N5C 3K5	Pre-populated by Distributor			
	E. Department Fax	-	519-485-5838	Pre-populated by Distributor (Optional)			
	F. Department Phone	-	519-485-1820	Pre-populated by Distributor			
	G. Department Email	-	Generation@erthpower.com	Pre-populated by Distributor			

3. Ger	B. General				
3.01	Application Information				
	A. Project Name	-	DER Working Group Example #1	-	
	B. Application Submission Date	Date	2023-09-18	Format: YYYY-MM-DD	
3.02	2 Applicant Information				
	A. Applicant (Company Name)	-	ABC Inc.	-	
	B. Applicant Type	Select	Property Owner/Landlord/Property Managemer	-	
	C. Applicant Representative (Individual Name)	-	Somebody	-	
	D. Applicant Address	-	123 Any Street	Corporate Address (if applicable)	
	E. Applicant City	-	City #1	-	
	F. Applicant Postal Code	-	A0A 0A0	Format: A0A 0A0	
	G. Applicant Fax	-		Optional	
	H. Applicant Phone	-	123-234-3456	Format: XXX-YYY-ZZZZ	
	I. Applicant Email	-	abc.def@gmail.com	-	

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4. Pro	ject Information				
4.01	Project Nameplate & Type				
	A. Proposed Capacity (Aggregate)	kW	100	AC capacity	
	B. Exporting/Non-Exporting	Select	Exporting	Indicate if capable of exporting to grid	
	C. Proposed Export Capacity (Aggregate)	kW	10	If capacity is different from Proposed Capacity	
	D. Connection Type (Single/Three-Phase)	Select	Three Phase	-	
	E. Inverter-Based/Non-Inverter-Based	Select	Inverter-Base	-	
4.02	Proposed DER Fuel/Energy Type				
	Please use the selection below to identify the proposed DER fuel/energy type.				
	A. Solar	kW	100	-	
	B. Wind	kW		-	
	C. Water (Hydroelectric)	kW		-	
	D. Biofuel/Biogas	kW		-	
	E. Thermal	kW		Other than biofuel	
	F. Energy Storage (including bi-directional EV)	kW		-	
	G. Other	Specify		Enter specific technology type and kW information	
5. Site	Information				
5.01	Existing Account Holder				
	A. Existing Account Number (if Applicable)	-	123456789-01	Required if applicable	
	B. Existing Account Holder Name (if Applicable)	-	XYZ Ontario Inc.	Required if applicable	
5.02	Site Information				
	A. Site Address	_	123 Street St	Location of proposed facility	
	B. Site City/Town/Township	_	City, Ontario	-	
	C. Site Postal Code	_	H0H 0H0	-	
	D. Site GPS Co-ordinates	_	NA	Required for rural locations	
5.03	Existing DERs at Site				
	If the Applicant has existing DER(s) at the same project site, please provide information required below to ensure proper preliminary connection assessment. If there is a variety of fuel/energy types, please explain in section "6.01 Other Information" below.				
	A. Existing DER Capacity (Aggregate)	kW		Required if existing DER(s) installed	
	B. Existing DER Connection (Single/Three-Phase)	Select	Three Phase	Required if existing DER(s) installed	
	C. Existing DER Type (Inverter/Non-Inverter)	Select	Inverter	Required if existing DER(s) installed	
	D. Existing DER Intent (Exporting/Non-Exporting)	Select	Multiple Units (provide details in Section 6)	Required if existing DER(s) installed	
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Prelim	ilinary Consultation Information Request (PCIR)							
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6. Oth	er Information							
6.01	Other Information							
	A. In the comment box below, the Applicant can proconsidered beneficial for the purpose of obtaining a		dicated in the above section(s) or					
	Installing 100 kW rooftop solar, net m	netering project						
	B. If the Applicant chooses to provide accompanying documents, please list them below.							
7. Dist	tributor Office Use Only (Optional)							
7.01	PCIR Status							
	A. Date Received	Date	Completed by Distributor					
	B. Date Returned Incomplete	Date	Completed by Distributor					
	C. Date Preliminary Consultation Report Issued	Date	Completed by Distributor					

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