



Y-W ELECTRIC ASSOCIATION, INC.

P.O. BOX Y • 26862 U.S. HWY 34 • AKRON • COLORADO • 80720

(970) 345-2291 • 800-660-2291 • Fax (970) 345-2154 • www.ywelectric.coop

A Touchstone Energy® Cooperative 

PRE-APPLICATION INTERCONNECTION DATA FORM

SUBMISSION NOTES:

This document may be submitted to Y-WEA either electronically or in original hardcopy format.

If submitted electronically, the signatures in Part 1 and Part 5 *must* be secure and verifiable digital AATL-compliant signatures, traceable back to the signer. Either the digital certificate must include the signer's name and, if signing for an organization, the organization, or a traceability audit report similar to DocuSign's digitally-signed summary file must be included with this PDF form.

If submitted in original hardcopy format, the signatures in Part 1 and Part 5 *must* be original wet-ink signatures. Printouts of digital signatures are not allowable.

Last Reviewed: January 4, 2023

Last Updated: January 4, 2023



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When required, this application must be completed and returned to Y-W Electric Association’s Engineer as per the requirements in Attachment 2 – Applicability of Requirements and Generator Interconnection Procedure in order to begin processing the request. Please refer to the Generator Interconnection Procedure for additional information.

This form is required for any proposed residential installation greater than 10 kW or for any commercial installation greater than 25 kW or for any installation not requesting net metering. This form is optional for any installation below these limits.

If a processing fee of \$100 accompanies this form, the applicable system data shown at the end of the form will be completed for the proposed interconnection location and returned to the applicant in order to assist them in evaluating and/or designing their generation system. If this fee is paid with the pre-application interconnection data form, the application deposit required for an Interconnection Application will be reduced by \$100. No Y-WEA system information will be provided to any party for any location until this form is completed and submitted. For requests where this form is required, Part 4 must be completed *in its entirety* for Y-WEA system data to be provided to the applicant.

PART 1 - INTERCONNECTION CUSTOMER DATA			
If this is a Net Metering or self-generation installation, this section must contain the information for Y-WEA’s Member.			
If this is an interconnection for the purposes of selling the generated energy to another party, this section must contain the information for the primary or principal owner of the generating facility.			
Interconnection Customer Name:		Best Phone Number:	
Mailing Address:	City:	State:	ZIP Code:
Email Address:	Contact Person (if the customer is a company):		
<p>By signing and submitting this Pre-Interconnection Data Form for a net metering installation, or for another self-generation arrangement where a generating facility is proposed to serve some or all of a load normally served by Y-W Electric Association, Inc. (the “Cooperative”) distribution facilities, the Cooperative member listed above indicates that they have knowledge of this proposed installation and that they approve of the engineer’s or installer’s, as applicable, request for preliminary system data in support of the proposed interconnection. Whether signing and submitting this form for a net metering or self-generation installation, or for an energy-exporting proposed interconnection installation, the customer authorizes the Cooperative to share this data with and communicate with the Engineering Firm and/or the Installer listed below regarding this project. The customer further acknowledges that the data provided is subject to change without notice. These values are valid with the existing facilities to the point noted by the Cooperative’s engineer below and under the normal operating conditions for both Cooperative’s and its power supplier’s system as of the date on this letter. The Cooperative will not inform the customer or any of the customer’s representatives of any transformer or system changes, either temporary or permanent, that may affect the provided fault current or distributed energy resource interconnection capacity data. By providing the information in this form, the Cooperative does not assume responsibility for any damage to any of customer’s, or customer’s agents’, successors’ and assigns’, property, and as consideration for Cooperative providing this information, customer hereby releases Cooperative from any and all claims that may be legally released arising out of or relating to the furnishing of information in this Form. Finally, the Cooperative member, by signing here, is authorizing the Cooperative’s employees and/or agents to enter the member’s property at the Cooperative’s convenience for the purpose of accessing the Cooperative’s equipment in order to acquire all necessary system information required to provide any data requested in Part 5 of this document and, in signing this document, the member certifies that they have the authority to permit the Cooperative’s employees’ and/or agents’ access.</p>			
Y-WEA Member’s/Interconnection Customer’s Signature:		Date:	

PART 2 – ENGINEERING FIRM DATA

This section must be filled out if an Engineering Firm is being retained for this project and will need to receive communication on behalf of the Interconnection Customer relating to this proposed project. The primary contact listed below may also designate additional personnel from the same firm to participate in communications regarding this project.

Engineering Firm Name:	Best Phone Number:		
Mailing Address:	City:	State:	ZIP Code:
Email Address:	Primary Contact Person:		

PART 3 – INSTALLER DATA

This section must be filled out if an Installer is being retained for this project and will need to receive communication on behalf of the Interconnection Customer relating to this proposed project. The primary contact listed below may also designate additional personnel from the same company to participate in communications regarding this project.

Engineering Firm Name:	Best Phone Number:		
Mailing Address:	City:	State:	ZIP Code:
Email Address:	Primary Contact Person:		

PART 4 – GENERATOR PROJECT INFORMATION

List all owners of the generating facility, if different from Part 1, including percent ownership by each owner:

Account or Service Location Number (if known) for the generator:	If Account or Service Location Number is not known, provide a detailed description of the location for fault current analysis. This request cannot be acted upon without adequate information to determine the exact service location.
Detailed Description of Generator Location:	
<hr/> <hr/>	

Is this a net metering installation? Check One: Yes No

Please note that net metering only applies to residential generators up to 10 kW or commercial generators up to 25 kW. Larger generators are not eligible for net metering.

Proposed Generator Size: _____ kW	AC Volts: _____	Check One: <input type="checkbox"/> Single Phase <input type="checkbox"/> Three Phase			
Generator Type (check one):	<input type="checkbox"/> Solar	<input type="checkbox"/> Wind	<input type="checkbox"/> Hydropower	<input type="checkbox"/> Diesel Fuel	
	<input type="checkbox"/> Natural Gas	<input type="checkbox"/> Fuel Oil	<input type="checkbox"/> Other: _____		
Interconnection Type (check one):	<input type="checkbox"/> Secondary	<input type="checkbox"/> 7.2/12.47 kV	<input type="checkbox"/> 69 kV	<input type="checkbox"/> 115 kV	<input type="checkbox"/> 230kV

IF THIS IS NOT A NET METERING OR SELF GENERATION INSTALLATION, COMPLETE THE FOLLOWING:

Anticipated Energy Purchaser: _____
Proposed Energy Delivery Location: _____

PART 5 – SIGN OFF AREA

This section may be completed and signed by the Interconnection Customer, the Engineering Firm, or the Installer.

I hereby (*check one*) request, or do not request, the attached basic system data from Y-W Electric Association, Inc. for my proposed interconnection as detailed above. If I am requesting the basic system data, I understand that a processing fee of \$100 must accompany this form, and I understand that all data provided including available system capacity is subject to change until such time as I submit an Interconnection Application. I understand that submission of this form does not reserve my proposed project any capacity on Y-W Electric Association's or any transmission provider's system and that submission of this form does not enter me into any interconnection queue.

Authorized Signature:

Date:

SUBMISSION INSTRUCTIONS

Please complete as much of this form as possible and mail or deliver, together with the processing fee if basic system data is requested, to:

Y-W Electric Association, Inc.
 ATTN: Interconnection Data Requests
 26862 US Hwy 34
 PO Box Y
 Akron, CO 80720

This form may also be emailed to interconnections@ywelectric.coop except that payment must be received referencing this form in order for any data to be provided in return.

PART 6 – BASIC SYSTEM DATA

This section to be filled out by Y-WEA:

Account Number (if applicable):

Facilities Type: (*check all that apply*)

Primary (7.2/12.47 kV) Secondary Single phase Three phase
 Transmission: 69kV 115kV 230kV

If Service Type is
Secondary:

Transformer kVA:

Transformer Type

Single phase Three phase

Primary Voltage:

Transformer Configuration:

Delta Wye

Secondary Voltage:

%Z:

Expected fault current values below given at (check all that apply):

Transmission Level Primary Voltage (7.2/12.47 kV) Transformer Secondary Terminal Meter Point

Max LLL(G):

Max LLG:

Max LL:

Max LG:

If Interconnection Type
is Net Metering:

System Element Description

DER Capacity (in kW)

Check line that constrains
capacity to proposed location

Substation: _____

Feeder: _____

Downline Recloser:

Statutory Limit (*check one*)

Residential Commercial

Service Location Transformer

Existing DER Capacity
Connected to this Substation

Part 6 continues on the next page.

PART 6 – BASIC SYSTEM DATA *(continued)*

If Interconnection Type is Net Metering <i>(continued)</i> :	Existing DER Capacity Connected to this Feeder		
	Existing DER Capacity Connected to this Line Section		
	Existing DER Capacity Connected to this Transformer		
	DER Applications Queued for this Substation		
	DER Applications Queued for this Feeder		
	DER Applications Queued for this Line Section		
	DER Applications Queued for this Transformer		
	DER Capacity Available at proposed location:		Obtained by subtracting applicable existing and queued DER capacity from constraining system element capacity
Dist from Substation (line mi):	Line Section Peak Load (kW):	Line Section Min. Daytime Load:	Line Sect Absolute Min. Load:
Line Section Off-Season Peak Load:		Peak : Off-Season Peak Ratio:	Circuit is Highly Seasonal: <input type="checkbox"/> Yes <input type="checkbox"/> No
Protective Devices installed upline of point of interconnection:	<u>Device Name:</u>	<u>Current Rating:</u>	<u>Directional Capable?</u>
	Main Feeder Recloser		<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
Voltage Regulating Devices installed upline of point of interconnection:	<u>Device Name:</u>	<u>kVA Rating:</u>	<u>Bidirectional Capable?</u>
	Sub: <input type="checkbox"/> LTC <input type="checkbox"/> Regulators		<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
Connection characteristic of facilities present at proposed point of interconnection: <i>(check all that apply)</i> <input type="checkbox"/> Radial Y-WEA Secondary, Distribution, or Transmission <input type="checkbox"/> Radial Other Transmission <input type="checkbox"/> Networked Other Transmission			
List and explain any other capacity-constraining factors present which affect this proposed interconnection: <hr/> <hr/>			
I hereby certify that this fault current and system analysis was prepared by me or under my direct supervision and that I am a duly registered Professional Engineer in the State of: <input type="checkbox"/> Colorado <input type="checkbox"/> Nebraska.			(Engineer's Seal)
Engineer's Signature:			
Date:			