This form is for customers applying for a Preliminary Assessment for connecting a **Distributed Energy Resource (DER) greater than 10kW**. For DER projects of 10kW or less, please fill out Form C.

All fields are required. Email the completed form to [service@hearstpower.com](mailto:service@hearstpower.com). If you have any questions, you may reach out to us through the email provided or call us at 705-372-2815.

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| 1. **General Information:** |
| Project Name: |
| Application Submission Date: |
| Primary Contact:  *(company name)*  Contact Name:  Telephone No.:  E-mail:  Address:  City/Town:  Postal Code: |

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| 1. **Project Information:** | | |
| Project Intent: | [ ] Inject energy to the grid  [ ] Do not inject energy to the grid for:  [ ] Load Displacement  [ ] Emergency Backup only when the grid is not available  [ ] Other (please specify): | |
| Size: | Proposed Installed Capacity | kW |
| Connecting on | [ ] Single phase  [ ] 3 phase |
| Project Type: | DER Type | [ ] Synchronous [ ] Other *(please specify*):  [ ] Induction  [ ] Inverter based |
| DER Fuel/Energy Type |  |
| Site Information: | Municipal Address | Address:  City/Town/Township:  Postal Code:  Existing Account number (if applicable): |

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| **For Office Use Only** | |
| [ ] Received | Date: |
| [ ] Incomplete – Returned | Date: |
| [ ] Complete | Date: |
| [ ] Preliminary Consultation Report Sent | Date: |
| [ ] Application ID Assigned | ID: |