

INITIAL APPLICATION TO CONNECT DISTRIBUTED GENERATION > 10kW



Centralines Limited
PO Box 59, Waipukurau
Telephone (06) 858 7770 Fax (06) 858 6601
www.centralines.co.nz

This form complies with the Electricity Governance (Connection of Distributed Generation) Regulations and constitutes an initial application for connection in accordance with Clause 11, Part 2, Schedule 1.

Any approved connection shall be connected and operated in accordance with the Centralines connection and operation policies available at www.centralines.co.nz and the terms will be negotiated with Centralines prior to connection.

APPLICANT DETAILS

Full Name: _____
Company: _____
Address: _____
City: _____ Postcode: _____
Mobile: _____ Phone: _____
Fax: _____
Email: _____

ELECTRICIAN DETAILS

Full Name: _____
Company: _____
Address: _____
City: _____ Postcode: _____
Mobile: _____ Phone: _____
Fax: _____
Email: _____

INSTALLATION DETAILS

ICP Number: _____
Energy Retailer: _____
New Existing Residential Commercial
Address: _____
City: _____ Postcode: _____
Phone: _____
Fax: _____

TECHNICAL DETAILS

*For Generators 1MW or larger, or generating at 11kV or higher, Centralines may request further information in accordance with System Operator requirements.

Manufacturer: _____
Model: _____
Output Voltage: _____ Rated kW: _____ Rated kVA: _____
Reactive Power (kVAR) requirements: _____
Fault Level Contribution (kA): _____
Method of Voltage Control: _____

Means of Synchronisation and connection and disconnection
(provide circuit breaker details):

Means of compliance with frequency and voltage:

Proposed injection: Intermittent Peak Continuous

Single Line Diagram (attached): Yes No

Type: Solar PV Gas Turbine
Wind Turbine Steam Turbine
Micro Hydro Other (specify) _____

No of Phases: Single Three

DC Inverter Connected AC Synchronous AC Asynchronous

If Inverter connected - does system comply with AS4777? Yes No
(Attach certification)
Details of any battery storage:

Details of Isolation/Disconnection:

Details of Protection Scheme:

Proposed date of connection to the Centralines network: _____ / _____ / _____

I hereby apply to connect a Distributed Generator to the Centralines network and confirm that the above information is correct and that the Generator shall at all times be operated in accordance with all Centralines connection and operational standards.

I confirm that I will not connect any generation until I have received written approval from Centralines.

Name: _____ Date: _____ / _____ / _____

Signature: _____