

Form 6032

Wisconsin Distributed Generation Facility Interconnection Pre-Application Data Report Request

Notice: This form must be completed and submitted with fees to meet Wisconsin Admin. Code PSC 119.13 (2). Personal information collected will be used for administrative purposes only.

DATE (MM / DD / YYYY)

1. REQUESTOR CONTACT INFORMATION

COMPANY NAME

CONTACT NAME

STREET ADDRESS

CITY

STATE

ZIP CODE

PHONE NUMBER

EMAIL ADDRESS

2. PROJECT INFORMATION

PROJECT NAME

DG FACILITY NAMEPLATE RATING

DG FACILITY TYPE

Number of Phases:

Service Voltage:

Voltage

Stand-Alone Generator?

Yes

No

Existing DG Facility?

Yes

No

LOCATION OF EXISTING DG FACILITY

COUNTY OF EXISTING DG FACILITY

3. PROPOSED POINT OF COMMON COUPLING

STREET ADDRESS

CITY

STATE

ZIP CODE

COUNTY

CROSS STREETS

LATITUDE

LONGITUDE

METER #

UTILITY EQUIPMENT #

Other Identifying Information: