

Form A

Initial Feasibility Assessment Application Form Distribution System



This Application Form is for Generators applying for Initial Feasibility Assessment (“IFA”).

It is important that the Generator provides all of the information requested below. Failure to comply may result in the non-acceptance of this application by Enersource Hydro Mississauga Inc.

Date: _____ (dd / mm / yyyy)

1. Project Name: _____

2. Project Size:

Number of Units _____
 Nameplate Rating of Each Unit _____ kW
 Generator connecting on single phase three phases
 Proposed Total Nameplate Capacity _____ kW

3. Project Location:

Address _____

 Postal Code _____ - _____
 Existing EHM Account _____
 Contract with Energy Retailer [Yes/No] _____
 OPA Reference # (if applicable) _____

4. Project Information:

Project single Point of Contact person _____
 Proposed Start of Construction _____
 Proposed Energization Date _____

	Generator	Owner	Consultant
Company/Person			
Contact Person			
Mailing Address			
Telephone			
Fax			
Email			

5. Project Type:

- Wind Turbine
 Hydraulic Turbine
 Steam Turbine
 Solar
 Diesel Engine
 Gas Turbine
 Fuel Cell
 Biomass
 Co-generation/CHP (Combined Heat & Power)
 Other (Please Specify)