FORM FOR FILING RATE SCHEDULES FOR ENTIRE TERRITORY SERVED Community, Town or City SALT RIVER ELECTRIC Name of Issuing Corporation P.S.C. No. 12 1st Original Sheet No. 103 Canceling P.S.C. No. Original Sheet No. 150 CLASSIFICATION OF SERVICE LEVEL 1 Application for Interconnection and Net Metering Use this application form only for a generating facility that is inverter based and certified by a nationally recognized testing laboratory to meet the requirements of UL1741. Submit this Application to: Salt River Electric, 111 W. Brashear Ave., Bardstown KY 40004 If you have questions regarding this Application or its status, contact the Cooperative at: 502.348.3931 Member Acct. # Member Name Member Phone # E-mail: CANCELLED Project Contact Person: JUN 0 1 2015 E-mail Address (Optional): Phone No.: KENTUCKY PUBLIC SERVICE COMMISSION Provide names and contact information for other contractors, installers, or engineering firms involved in the design and installation of the generating facilities: Wind Hydro Biogas Biomass Solar Energy Source: lnverter Manufacturer and Model #: Inverter Power Rating: Inverter Voltage Rating: Power Rating of Energy Source (i.e., solar panels, wind turbine):

Ye PUBLIC SERVICE COMMISSION No Is Battery Storage Used: JEFF R. DEROUEN

EXECUTIVE DIRECTOR

TARIFF BRANCH

ber 11/2010 DATE OF ISSUE: Obt

DATE EFFECTIVE: Novemb

ISSUED BY

TITLE: President & CEEFFECTIVE

11/1/2010

Case No. 2010-Dated: