

Eligible Wind Turbine Application Form

Attachment H - PON 2439

Contact Information

Name of Applicant _____

Name of Firm _____

Mailing Address _____

City _____ State _____ Zip _____

E-mail _____ Phone Number _____ Fax _____

Wind Turbine Information

Make of Wind Turbine: _____

Model of Wind Generator: _____

Wind turbine power output at 11 m/s per the power curve from IEC 61400-12-1: _____

Identify testing laboratory or organization:

Checklist (This form will be returned if the following are not complete and included or attached)

- Technical information and specifications on the wind turbine, inverter, and tower.

AND

- Evidence that an international organization, accredited to ISO/IEC Guide 65 or EN45011, has certified that the turbine meets the appropriate sections of IEC 61400 for acoustics, durability, safety, and performance standards.

NYSERDA is a member of the Interstate Turbine Advisory Council (ITAC), established under the Clean Energy States Alliance. One of ITAC's goals is to establish a collaborative group of public clean energy programs to evaluate and identify small and medium wind turbines that fit the performance and durability expectations of incentive providers. ITAC has published its Unified List of Turbines, which is available at <http://www.cleanenergystates.org/projects/ITAC/itac-unified-list-of-wind-turbines/>. NYSERDA has adopted this list for all turbine sizes included in the list. NYSERDA reserves the right to impose additional restrictions or relax ITAC's requirements dependent on program needs.

Certification Statement- Review and sign for NYSERDA's review.

I certify that all information provided in this form, including all attachments, are true and correct to the best of my knowledge.

Applicant Signature _____ Date _____

All forms and Attachments should be sent to:

New York State Energy Research and Development Authority
PON 2439: Wind Turbine Application
17 Columbia Circle
Albany, NY 12203-6399

FAXED FORMS WILL NOT BE ACCEPTED.

Forms, attachments and links may alternatively be e-mailed to SmallWind@nyserdera.ny.gov.

For Internal Use Only

Date Received by NYSERDA _____

Completed Form and All Required Attachments _____ Yes _____ No

Approved _____ Date _____

Denied _____ Date _____