

# Emergency Backup Generator Declaration

## About This Declaration

- This declaration form is for emergency backup generators whose sole purpose is to supply facility loads when utility power supply is not available.
- Declaring a generator as solely emergency backup can reduce requirements for SCADA monitoring, settlement charges and a connection agreement.
- This form is NOT for generators that may be used for load displacement including global adjustment curtailment and peak shaving.

## Important Notes

- Along with this form, the customer shall provide a single line diagram (SLD) of the generating facility including the Interface Point / PCC to Alectra Utilities' distribution system.
- This Declaration Form and the associated SLD must be signed and sealed by a licensed Ontario Professional Engineer (P.Eng.) or signed by an Authorized Authority.

## Generator Information

1. **Project Location:** Address \_\_\_\_\_  
City / Town / Township \_\_\_\_\_  
Postal Code \_\_\_\_\_
2. **Nameplate Capacity:** \_\_\_\_\_ kW
3. **Project Type:** \_\_\_\_\_ (eg. Diesel Engine)
4. **Facility Owner:** \_\_\_\_\_
5. **Generator Owner:** \_\_\_\_\_

## Project Details

1. **Transition Type:**  Closed ("make before break")  Open ("break before make")
2. **Transition Time (ms):** \_\_\_\_\_ (length of time generator remains parallel to the grid)

## Declaration

I certify that the emergency backup generator:

- Will only be used for emergency backup of load when utility power supply is not available
- Will NOT be used for load displacement (*Including Global Adjustment Curtailment*)
- Will NOT operate in parallel with Alectra Utilities' grid for more than 6 cycles (100ms)
- Will NOT be operated for any reason other than emergency backup, without first contacting Alectra Utilities
- I certify the information provided on and in connection with this form is true, accurate and complete.
- If at any future time, the declarations above no longer apply, I shall notify Alectra Utilities immediately and acknowledge that a full Connection Impact Assessment will be conducted and additional requirements may apply.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name (*Print*)

\_\_\_\_\_  
Title

\_\_\_\_\_  
Relation to the generator