

**Engineering Department**  
Orillia Power Distribution Corporation  
360 West Street South  
P.O. Box 398  
Orillia, ON L3V 6J9

**Date:** \_\_\_\_\_

**RE: Request for Generator Pre-Connection Assessment for Connection to  
Orillia Power (OPDC)'s Distribution Grid**

We would like to request an initial feasibility assessment for the following proposed generator to connect at the following location in the City of Orillia;

Project Name: \_\_\_\_\_ IESO Reference #: \_\_\_\_\_

Generator Site/Service Address: \_\_\_\_\_

Proposed Project Size: \_\_\_\_\_ kW AC  FIT/MicroFIT  Net Metering  Load Displacement

Solar  Wind  Water  Biomass  Natural Gas/CHP  Other: \_\_\_\_\_

Proposed Start of Construction: \_\_\_\_\_ Proposed In-Service Date: \_\_\_\_\_

Above information is true and correct. I will abide by the rules and regulations of OPDC, IESO, and Hydro One for connection of this project to the distribution grid.

Company/Owner: \_\_\_\_\_

Representative: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Signature: \_\_\_\_\_

I give permission to this representative to act on my behalf to pursue all documentation and process requirements for the connection of this generation project.  Leaser  Install Contractor

Representative: \_\_\_\_\_

Company: \_\_\_\_\_

Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

Signature: \_\_\_\_\_

Note: All fields are required for processing.