OAK SQUARE
PARTNERS

January 17, 2019

Rhode Island Public Utilities Commission
Attn: Luly E. Massaro, Commission Clerk
89 Jefferson Blvd.
Warwick, RI 02888

Dear Ms. Massaro:
Enclosed please find one (1) original and three (3) copies of the Renewable Energy Resources Eligibility Form for Palmer Circle Solar Two. Palmer Circle Solar Two is seeking a Conditional Order until it registers with the GIS and achieves commercial operation.

Thank You,

John Typadis, Principal
Oak Square Partners, LLC

RIPUC Use Only	
Date Application Received:	__ __/__ __/__ __
Date Review Completed:	__ __/__ __/__ __
Date Commission Action:	__ __/__ __/__ __
Date Commission Approved:	__ __/__ __/__ __

GIS Certification #:

_____

RENEWABLE ENERGY RESOURCES ELIGIBILITY FORM

The Standard Application Form
Required of all Applicants for Certification of Eligibility of Renewable Energy Resource
(Version 8 – December 5, 2012)

STATE OF RHODE ISLAND PUBLIC UTILITIES COMMISSION
Pursuant to the Renewable Energy Act
Section 39-26-1 et. seq. of the General Laws of Rhode Island

NOTICE:
When completing this Renewable Energy Resources Eligibility Form and any applicable Appendices, please refer to the State of Rhode Island and Providence Plantations Public Utilities Commission Rules and Regulations Governing the Implementation of a Renewable Energy Standard (RES Regulations, Effective Date: January 1, 2006), and the associated RES Certification Filing Methodology Guide. All applicable regulations, procedures and guidelines are available on the Commission's web site: www.ripuc.org/utilityinfo/res.html. Also, all filings must be in conformance with the Commission's Rules of Practice and Procedure, in particular, Rule 1.5, or its successor regulation, entitled "Formal Requirements as to Filings."

- **Please complete the Renewable Energy Resources Eligibility Form and Appendices using a typewriter or black ink.**

- **Please submit one original and three copies of the completed Application Form, applicable Appendices and all supporting documentation to the Commission at the following address:**

Rhode Island Public Utilities Commission
Attn: Luly E. Massaro, Commission Clerk
89 Jefferson Blvd
Warwick, RI 02888

In addition to the paper copies, electronic/email submittals are required under Commission regulations. Such electronic submittals should be sent to Res.filings@puc.ri.gov.

- **In addition to filing with the Commission, Applicants are required to send, electronically or electronically and in paper format, a copy of the completed Application including all attachments and supporting documentation, to the Division of Public Utilities and Carriers and to all interested parties. A list of interested parties can be obtained from the Commission's website at www.ripuc.org/utilityinfo/res.html.**

- **Keep a copy of the completed Application for your records.**

- **The Commission will notify the Authorized Representative if the Application is incomplete.**

- **Pursuant to Section 6.0 of the RES Regulations, the Commission shall provide a thirty (30) day period for public comment following posting of any administratively complete Application.**

- **Please note that all information submitted on or attached to the Application is considered to be a public record unless the Commission agrees to deem some portion of the application confidential after consideration under section 1.2(g) of the Commission's Rules of Practice and Procedure.**

- **In accordance with Section 6.2 of the RES Regulations, the Commission will provide prospective reviews for Applicants seeking a preliminary determination as to whether a facility would be eligible prior to the formal certification process described in Section 6.1 of the RES Regulations. Please note that space is provided on the Form for applicant to designate the type of review being requested.**

- **Questions related to this Renewable Energy Resources Eligibility Form should be submitted in writing, preferably via email and directed to: Luly E. Massaro, Commission Clerk at Res.filings@puc.ri.gov.**

SECTION I: Identification Information

1.1 Name of Generation Unit (sufficient for full and unique identification):
Palmer Circle Solar Two

1.2 Type of Certification being requested (check one):
X Standard Certification Prospective Certification (Declaratory Judgment)

1.3 This Application includes: (Check all that apply)1

- ❑ APPENDIX A: Authorized Representative Certification for Individual Owner or Operator
- X APPENDIX B: Authorized Representative Certification for Non-Corporate Entities Other Than Individuals
- ❑ APPENDIX C: Existing Renewable Energy Resources
- ❑ APPENDIX D: Special Provisions for Aggregators of Customer-sited or Off-grid Generation Facilities
- ❑ APPENDIX E: Special Provisions for a Generation Unit Located in a Control Area Adjacent to NEPOOL
- ❑ APPENDIX F: Fuel Source Plan for Eligible Biomass Fuels

1.4 Primary Contact Person name and title: John Typadis, Principal

1.5 Primary Contact Person address and contact information:
Address: 119 Braintree Street, Suite 211, Allston, MA 02134
Phone: 617-409-7379 Fax: N/A
Email: john@oaksquarepartners.com

1.6 Backup Contact Person name and title: Sevag Khatchadourian, Principal

1.7 Backup Contact Person address and contact information:
Address: 119 Braintree Street, Suite 211, Allston, MA 02134
Phone: 617-504-2271 Fax: N/A
Email: sevag@oaksquarepartners.com

1.8 Name and Title of Authorized Representative (*i.e.*, the individual responsible for certifying the accuracy of all information contained in this form and associated appendices, and whose signature will appear on the application): John Typadis, Principal

Appendix A or B (as appropriate) completed and attached? X Yes ❑ No ❑ N/A

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1 Please note that all Applicants are required to complete the Renewable Energy Resources Eligibility Standard Application Form and all of the Appendices that apply to the Generation Unit or Owner or Operator that is the subject of this Form. Please omit Appendices that do not apply.

1.9 Authorized Representative address and contact information:
Address: 119 Braintree Street, Suite 211, Allston, MA 02134
Phone: 617-409-7379 Fax: N/A
Email: john@oaksquarepartners.com

1.10 Owner name and title: Oak Square Development, LLC

1.11 Owner address and contact information:
Address: 119 Braintree Street, Suite 211, Allston, MA 02134
Phone: 617-409-7379 Fax: N/A
Email: john@oaksquarepartners.com

1.12 Owner business organization type (check one):
- ❑ Individual
- ❑ Partnership
- ❑ Corporation
- X Other: Limited Liability Company

1.13 Operator name and title: Same as Owner

1.14 Operator address and contact information:
Address: Same as Owner
Phone: _____ Fax: _____
Email: _____

1.15 Operator business organization type (check one):
- ❑ Individual
- ❑ Partnership
- ❑ Corporation
- X Other: Limited Liability Company

SECTION II: Generation Unit Information, Fuels, Energy Resources and Technologies

2.1 ISO-NE Generation Unit Asset Identification Number or NEPOOL GIS Identification Number (either or both as applicable): _____

2.2 Generation Unit Nameplate Capacity: 0.997 MW

2.3 Maximum Demonstrated Capacity: 0.997 MW

2.4 Please indicate which of the following Eligible Renewable Energy Resources are used by the Generation Unit: (Check ALL that apply) – *per RES Regulations Section 5.0*

X Direct solar radiation
- ❑ The wind
- ❑ Movement of or the latent heat of the ocean
- ❑ The heat of the earth
- ❑ Small hydro facilities
- ❑ Biomass facilities using Eligible Biomass Fuels and maintaining compliance with all aspects of current air permits; Eligible Biomass Fuels may be co-fired with fossil fuels, provided that only the renewable energy fraction of production from multi-fuel facilities shall be considered eligible.
- ❑ Biomass facilities using unlisted biomass fuel
- ❑ Biomass facilities, multi-fueled or using fossil fuel co-firing
- ❑ Fuel cells using a renewable resource referenced in this section

2.5 If the box checked in Section 2.4 above is "Small hydro facilities", please certify that the facility's aggregate capacity does not exceed 30 MW. – *per RES Regulations Section 3.32*

❑ ← check this box to certify that the above statement is true

X N/A or other (please explain) _____

_____

2.6 If the box checked in Section 2.4 above is "Small hydro facilities", please certify that the facility does not involve any new impoundment or diversion of water with an average salinity of twenty (20) parts per thousand or less. – *per RES Regulations Section 3.32*

❑ ← check this box to certify that the above statement is true

X N/A or other (please explain)

_____

_____

2.7 If you checked one of the Biomass facilities boxes in Section 2.4 above, please respond to the following:

A. Please specify the fuel or fuels used or to be used in the Unit: _____

_____

B. Please complete and attach Appendix F, Eligible Biomass Fuel Source Plan.
Appendix F completed and attached? ❑ Yes ❑ No X N/A

2.8 Has the Generation Unit been certified as a Renewable Energy Resource for eligibility in another state's renewable portfolio standard?

❑ Yes X No If yes, please attach a copy of that state's certifying order.

Copy of State's certifying order attached? ❑ Yes ❑ No X N/A

SECTION III: Commercial Operation Date

Please provide documentation to support all claims and responses to the following questions:

3.1 Date Generation Unit first entered Commercial Operation: __ __ / __ __ / __ __ at the site.

If the commercial operation date is after December 31, 1997, please provide independent verification, such as the utility log or metering data, showing that the meter first spun after December 31, 1997. This is needed in order to verify that the facility qualifies as a New Renewable Energy Resource.

Documentation attached? ❑ Yes ❑ No X N/A

3.2 Is there an Existing Renewable Energy Resource located at the site of Generation Unit?

❑ Yes
X No

3.3 If the date entered in response to question 3.1 is earlier than December 31, 1997 or if you checked "Yes" in response to question 3.2 above, please complete Appendix C.

Appendix C completed and attached? ❑ Yes ❑ No X N/A

3.4 Was all or any part of the Generation Unit used on or before December 31, 1997 to generate electricity at any other site?

❑ Yes
X No

3.5 If you checked "Yes" to question 3.4 above, please specify the power production equipment used and the address where such power production equipment produced electricity (attach more detail if the space provided is not sufficient):

_____

_____

_____

SECTION IV: Metering

4.1 Please indicate how the Generation Unit's electrical energy output is verified (check all that apply):

X ISO-NE Market Settlement System
❑ Self-reported to the NEPOOL GIS Administrator
❑ Other (please specify below and see Appendix D: Eligibility for Aggregations):

_____

Appendix D completed and attached? ❑ Yes ❑ No X N/A

SECTION V: Location

5.1 Please check one of the following that apply to the Generation Unit:

X Grid Connected Generation
❑ Off-Grid Generation (not connected to a utility transmission or distribution system)
❑ Customer Sited Generation (interconnected on the end-use customer side of the retail electricity meter in such a manner that it displaces all or part of the metered consumption of the end-use customer)

5.2 Generation Unit address: 41 Palmer Circle, Hopkinton, RI 02832

5.3 Please provide the Generation Unit's geographic location information:

A. Universal Transverse Mercator Coordinates: 19T 271565.66 m E 4595647.32 m N

B. Longitude/Latitude: 41.479905 / -71.735986

5.4 The Generation Unit located: (please check the appropriate box)

X In the NEPOOL control area
❑ In a control area adjacent to the NEPOOL control area
❑ In a control area other than NEPOOL which is not adjacent to the NEPOOL control area ← *If you checked this box, then the generator does not qualify for the RI RES – therefore, please do not complete/submit this form.*

5.5 If you checked "In a control area adjacent to the NEPOOL control area" in Section 5.4 above, please complete Appendix E.

Appendix E completed and attached? ❑ Yes ❑ No X N/A

SECTION VI: Certification

6.1 Please attach documentation, using one of the applicable forms below, demonstrating the authority of the Authorized Representative indicated in Section 1.8 to certify and submit this Application.

Corporations

If the Owner or Operator is a corporation, the Authorized Representative shall provide **either**:

(a) Evidence of a board of directors vote granting authority to the Authorized Representative to execute the Renewable Energy Resources Eligibility Form, **or**

(b) A certification from the Corporate Clerk or Secretary of the Corporation that the Authorized Representative is authorized to execute the Renewable Energy Resources Eligibility Form or is otherwise authorized to legally bind the corporation in like matters.

Evidence of Board Vote provided? ❑ Yes ❑ No X N/A

Corporate Certification provided? ❑ Yes ❑ No X N/A

Individuals

If the Owner or Operator is an individual, that individual shall complete and attach APPENDIX A, or a similar form of certification from the Owner or Operator, duly notarized, that certifies that the Authorized Representative has authority to execute the Renewable Energy Resources Eligibility Form.

Appendix A completed and attached? ❑ Yes ❑ No X N/A

Non-Corporate Entities

(Proprietorships, Partnerships, Cooperatives, etc.) If the Owner or Operator is not an individual or a corporation, it shall complete and attach APPENDIX B or execute a resolution indicating that the Authorized Representative named in Section 1.8 has authority to execute the Renewable Energy Resources Eligibility Form or to otherwise legally bind the non-corporate entity in like matters.

Appendix B completed and attached? X Yes ❑ No ❑ N/A

6.2 Authorized Representative Certification and Signature:

I hereby certify, under pains and penalties of perjury, that I have personally examined and am familiar with the information submitted herein and based upon my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate and complete. I am aware that there are significant penalties, both civil and criminal, for submitting false information, including possible fines and punishment. My signature below certifies all information submitted on this Renewable Energy Resources Eligibility Form. The Renewable Energy Resources Eligibility Form includes the Standard Application Form and all required Appendices and attachments. I acknowledge that the Generation Unit is obligated to and will notify the Commission promptly in the event of a change in a generator's eligibility status (including, without limitation, the status of the air permits) and that when and if, in the Commission's opinion, after due consideration, there is a material change in the characteristics of a Generation Unit or its fuel stream that could alter its eligibility, such Generation Unit must be re-certified in accordance with Section 9.0 of the RES Regulations. I further acknowledge that the Generation Unit is obligated to and will file such quarterly or other reports as required by the Regulations and the Commission in its certification order. I understand that the Generation Unit will be immediately de-certified if it fails to file such reports.

Signature of Authorized Representative:_____

SIGNATURE: DATE:

_____ 1/16/19

Manager

(Title)

GIS Certification #:
____

APPENDIX B
(Required When Owner or Operator is a Non-Corporate Entity Other Than An Individual)

STATE OF RHODE ISLAND
PUBLIC UTILITIES COMMISION

RENEWABLE ENERGY RESOURCES ELIGIBILITY FORM
Pursuant to the Renewable Energy Act
Section 39-26-1 et. seq. of the General Laws of Rhode Island

RESOLUTION OF AUTHORIZATION

Resolved: that John Typadis, named in Section 1.8 of the Renewable Energy Resources Eligibility Form as Authorized Representative, is authorized to execute the Application on the behalf of Oak Square Development, LLC, the Owner or Operator of the Generation Unit named in section 1.1 of the Application.

SIGNATURE: _____ DATE: 1/17/19

State: MA

County: Suffolk

(TO BE COMPLETED BY NOTARY) I, Stephanie Castaldi as a notary public, certify that I witnessed the signature of the above named John Typadis, and that said person stated that he/she is authorized to execute this resolution, and the individual verified his/her identity to me, on this date: 1/17/19.

SIGNATURE: _____ DATE: 1/17/19

My commission expires on: 3/01/2019

NOTARY SEAL: