

Load Interconnection Request Form (LIRF)



LIRF ID # (ATC use only): _____

Date Submitted: _____

Revision: _____

INSTRUCTIONS:

1. Complete the LIRF in its entirety. **Include proposed one-line for all projects affecting existing substations and if available, a project area map.**
2. ATC will update the T-D queue and assign a LIRF ID Number and a Date Submitted when a complete LIRF is received if the LIRF is considered public information.
3. Please submit the LIRF to: T-DLIRFS@atcllc.com

Substation Name: _____

Project Type*: _____ Other: _____

Requested In-Service Date: _____ LDC Expected Construction Start Date: _____

Can project be listed on T-D Queue Yes No (Confidential)

Project includes an un-forecasted load addition of _____ MW and _____ MVAR

*If the project type is a **transformer replacement**, indicate if such a project will include a **high voltage protection device replacement** as well. If a more detailed description of project type is necessary, provide in the Statement of Need.

REQUESTER INFORMATION

Requester: _____ Phone: _____ Email: _____

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact: _____ Phone: _____ Email: _____

LOAD INTERCONNECTION INFORMATION

Location (Attach a One Line Diagram, drawing or map): _____

Address: _____

State: _____ City: _____

One Line Diagram: _____

Will the distribution work require a LDC Certificate of Authority filing or CPCN filing with the PSCW?	Yes	No	Uncertain
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Total distributed energy resource (DER) at the interconnection point: Existing: _____ MW

Will a Portable Substation be required as part of this proposed project?	Yes	No	Uncertain
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LOAD INTERCONNECTION INFORMATION

PROJECT CHARACTERISTICS (Answer the following):

1. Are there any devices (esp. large motors) that may produce harmonic currents or voltage flicker/imbalance?
Yes No Uncertain If yes, please describe below.

2. Is there bridging capability of the new (or existing) load?
Yes No Uncertain If yes, please describe below.

3. Any other information related to the project that should be shared with ATC, such as Local Balancing Authority (LBA) metering impacts, significant site modifications, etc? If so, please describe below.

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TRANSFORMER SPECIFICATIONS

High Side: Voltage: kV Winding Type: _____

Low Side: Voltage: kV Winding Type: _____

Normal/Emergency ratings (MVA): _____ Nameplate impedance: _____

Capacitor banks MVAR & switching (timer, voltage): _____

Ultimate number of transformers at site (within next 10 years): _____

STATEMENT OF NEED FOR PROJECT

Include any information or report on the best-value alternative rationale. Attach additional sheets as needed.

JUSTIFICATION OF DISTRIBUTION PROJECT

Add Attachment: _____

Add Attachment: _____

Describe here:

SCOPE OF DISTRIBUTION PROJECT

Add Attachment: _____

Add Attachment: _____

Describe here:

