



**CITY OF KIEL, 621 6TH STREET, P.O. BOX 98, KIEL, WI 53042-0098
PH (920) 894-2909 *** FAX (920) 894-2585***www.kielwi.gov**

Include with Initial Application

Solar Customer Application Checklist 20kW or Less

Owner: _____

Address: _____

Phone: _____

Installer: _____

Installer Phone: _____

_____ Kiel PSC 6027 Standard Distributed Generation Application 20kW or less

_____ Site Plan

_____ One Line Drawing

_____ Inverter Cut Sheets Highlighted

_____ Panel Cut Sheet Highlighted

_____ Insurance Declaration

_____ Kiel PSC 6029 Distributed Interconnection Agreement 20kW or less

Application Review Fee

Commissioning Fee

_____ \$150.00 1-8kW

_____ \$150.00

_____ \$300.00 9-20 kW