## **Community Microgrid DER Application**

Project Name	
Applicant Organization	
Contact Person	
Contact Email	
Contact Email	
Project Location	
1 Toject Eocation	
Utility Provider	
System Type	_1
System Capacity (kW)	
cyclem capacity ()	
Interconnection Voltage (V)	
Estimated Applial Congression (IAM/b)	
Estimated Annual Generation (kWh)	
Project Description	
1 Toject Description	
Key Participants	
Proposed Timeline	
Funding Source	

Additional Information