

Exhibit C – Certificate of Completion

Distributed Energy Resource Certificate of Completion

MN DIP Simplified Process Interconnection

Customer: _____

Account Number: _____ Meter Number: _____

Application ID number: _____

Address of Distributed Energy Resource (DER):

City: _____ State: MN Zip: _____

Is the DER owner-installed? Yes No If no: Install

Company: _____

Contact: _____

Phone: _____ Email: _____

Electrician Name / License#: _____

The DER has been installed and inspected in compliance with the local electrical permitting authority as verified by the signature below or the additionally attached document.

Inspector Signature: _____

Print Name: _____ Date: _____

Authority Having Jurisdiction (city/county): _____

As a condition of interconnection, email a completed copy of this form to Interconnection

Coordinator at InterConnectionCoordinator@otpc.com.

If you prefer to mail the form, please mail to:

Otter Tail Power Company
Attn: Interconnection Coordinator
PO Box 469
Fergus Falls, MN 56538-0496