



MassCEC Data Acquisition System Service Provider Application

Thank you for your interest in becoming a MassCEC recognized Data Acquisition System (DAS) Provider. Please complete the following application and submit to PTS@masscec.com for consideration.

- 1) Please provide an administrative point of contact, company address, email, and phone number.

Company Name					
First Name			Last Name		
Street Address					
City		State		Zip Code	
Email			Phone Number		

- 2) Confirmation that your company’s equipment will meet the [Minimum Accuracy Requirements per NEPOOL GIS Rule 2.5\(j\)](#). Meters used as part of a Data Acquisition System must meet the greater than 10 kW minimum nameplate capacity (DC) tier. A list of previously approved meters can be found [here](#).

- a. Provide a list of meters (make and model) to be used at each nameplate capacity tier. Include data sheets and/or Nationally Recognized Testing Laboratory (NRTL) certification.

Manufacturer	Model	Accuracy Class (ANSI C-12)

*If more than three meters are used, submit additional meters on a new sheet.

- Datasheets and/or certifications are attached
- Meters have already been approved by MassCEC

I certify that this meter(s) meets the Minimum Accuracy Requirements per NEPOOL GIS Rule 2.5(j)

- b. If applicable, provide a list of current transformers (CTs) (make and model) to be used at each applicable nameplate capacity tier. Include data sheets and/or Nationally Recognized Testing Laboratory (NRTL) certification.

Manufacturer	Model

*If more than three CTs are used, submit additional CTs on a new sheet.

- Datasheets and/or certifications are attached
- Not applicable

I certify that this current transformer(s) meets the Minimum Accuracy Requirements per NEPOOL GIS Rule 2.5(j)

NOTE: The DAS Provider must inform MassCEC of changes to the equipment list.

3) Provide a brief response for items a through d.

a. Your company's anticipated number of photovoltaic systems for auto-reporting.

b. The industry [Aggregator\(s\)](#) your company intends to engage.

c. Your company's understanding of the SREC process, as related to DAS reporting obligations. Please note the Reporter role in the [SREC Process document](#).

d. Confirmation that the [Solar Renewable Energy Certificate \(SREC\) materials](#) have been reviewed.

I certify that I have reviewed the SREC materials.

4) Select how you would like your company to appear on the [List of Approved DAS Service Providers](#) on the MassCEC website.

a. Provide your company's official contact information for customers:

Company Name	
Web Address	
Phone Number	
Email Address	

b. Is your company a General or Select DAS Provider? Select providers only offer their services to specific sites or clients.

General

Select

If Select, please explain.

Auto-Reporting PTS Testing

The final step in becoming a MassCEC approved DAS provider is completing an auto upload to the API platform [here](#).

- If you need assistance with the auto-reporting process, please contact PTS IT by emailing PTS@masscec.com with the subject: CPS API.

Disclaimer

Note that completing this application and/or becoming a MassCEC recognized DAS Provider does not create the relationship of partners or joint venturers between you and MassCEC, does not make you an agent of MassCEC, and does not constitute an endorsement of your services by MassCEC. In the event that you become a recognized DAS Provider, you acknowledge that MassCEC is in no way responsible for the services your company provides and that you shall indemnify and hold MassCEC harmless from and against any and all liability, loss, claims, damages, fines, penalties, costs and expenses (including reasonable attorney's fees), judgments and awards sustained, incurred, or suffered by or imposed upon any third party arising out of or in connection with your company's services provided while a recognized DAS Provider.

Further, completing this form or becoming a MassCEC Approved DAS Provider does not give you permission to use or display the MassCEC logo.

For completion by MassCEC:

- | | |
|------------------------------------------------------------------|-----------------------|
| <input type="checkbox"/> DAS provider application received | Date: |
| <input type="checkbox"/> Auto upload test successfully completed | Date: |
| <input type="checkbox"/> Approved as a DAS provider | Date:
Approved By: |