

Application Firm Point-to-Point Transmission Service

1. The Identity, address, telephone number and facsimile number of the entity requesting service:

Identity: _____
DUNS Number _____
Address: _____
Telephone Number: _____
Facsimile Number: _____
Billing Contact _____
Billing Phone Number _____

2. Statement that the Entity requesting service is, or will be upon commencement of service, an Eligible Customer under the Tariff:

By submission of this form, the requesting entity represents that it is, or will be upon commencement of service, an Eligible Customer under the Tariff.

3. Location of the Point(s) of Receipt and Point(s) of Delivery and the identities of the Delivering Parties and the Receiving Parties:

| Point(s) of Receipt | Delivering Parties | Point(s) of Delivery | Receiving Parties |
|---------------------|--------------------|----------------------|-------------------|
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4. Location of the Generating Facility(ies) supplying the capacity and energy and the location of the load ultimately served by the capacity and energy transmitted:

5. Description of the supply characteristics of the capacity and energy to be delivered:

6. Estimate of the capacity and energy expected to be delivered to the Receiving Party(ies):

7. Service Commencement Date and the term of the requested Transmission Service:

8. Transmission capacity requested for each Point of Receipt and each Point of Delivery on the Transmission Provider's Transmission System.
