FORMAT-I(Applicable from 1st October,2011)

OPEN ACCESS (BILATERAL TRANSACTION)-APPLICATION FOR SCHEDULING

To: Nodal RLDC (NRLDC / WRLDC /ERLDC /SRLDC / NERLDC)

Transaction Type: Advance/FirstCome First Served/Day-Ahead/Contingency　　　For Month (in case of Advanced) ------

1	Application No:			Date	
2	Applicant Name			Registration Code	

3		DATE		Hours		*MW
	Scheduling Request	From	To	From	To	

4	Buyer/Seller Details		
		Injecting Entity	**Drawee Entity**
	Name of Entity		
	Entity in which it is embedded		
	Concerned SLDC/ Region		
	Whether Internalized(Yes/No)		
5	Applied route (from injection point to drawal point)	<e.g. (Orissa-ER-NR-Delhi)>	
6	If re-routing to be considered, please specify the alternate Route(s)		

7	Payment details of Non-Refundable Application Fee(Rs. 5000/-)	

8	**Declaration: The provisions of the Electricity Act 2003, IEGC,CERC regulations & CTU Procedures with respect to bilateral transactions in inter state transmission as amended from time to time are hereby understood and would be binding.**
	Signature (With Stamp)
	Date:　　　　　　　　　　　Name:
	Place:　　　　　　　　　　　Designation

9	For use of Nodal RLDCs
	Approval No :(If approved) Or reason of refusal(if refused)

* MW at the Regional periphery

Note: - If applying for the first time, kindly attach Registration form (Format VIII).

Enclosures: 1. Consent of SLDCs / Affidavit

　　　　　　2. Bank Draft/Local Cheque. (If payment by Bank Draft/Cheque)

Copy to:
　　　1.___SLDC
　　　2.___SLDC
　　　3.___RLDC
　　　4.___RLDC
　　　5.___RLDC

OPEN ACCESS (BILATERAL TRANSACTION) - CONCURRENCE FROM SLDC
(To be enclosed along with Application)

To _____SLDC

1	Application No. :		Date :	
2	Applicant Name :			
3	Registration Code :			

	Buyer / Seller Details			
			Injecting Entity	Drawee Entity
4	Name of entity			
	Entity in which it is embedded			
	Concerned SLDC			

	Concurrence Requested from SLDC (Where point of injection / Point of Drawl is located) :				
	DATE		HOURS		MW*
	FROM	TO	FROM	TO	
5					

	Concurrence Accorded by SLDC (Where point of injection / Point of Drawl is located) :				
	SLDC Ref. No.:		Date :		
	DATE		HOURS		MW*
	FROM	TO	FROM	TO	
6					

* MW at the Regional periphery
A curtailed concurrence (or no concurrence) is being granted on account of
_____
_____

<< Authorised Signatory for SLDC where point of injection / drawal is located >>

Signature (With Stamp)
Name & Designation

OPEN ACCESS (BILATERAL TRANSACTION)-ACCEPTANCE FOR SCHEDULING

Nodal RLDC
Acceptance No.   **Date:**
Ref: Original Application No.   **Date:**
1 Name of applicant   **Registration Code:**
2 Name of injecting Entity /State /Region
3 Name of Drawee Entity /State /Region
4 Wheeling Region(s)
5 Open Access Scheduling Requested:

DATE		HOURS		Capacity (MW)	ROUTE	Total MWh
From	**To**	**From**	**To**			

6 Open Access Scheduling Accepted:

DATE		HOURS		Capacity (MW)	ROUTE	Total MWh
From	**To**	**From**	**To**			

7 BiddingDetails

Transmission System	From(Date)	To(Date)	From(Hrs)	To (Hrs)	Applicable Bid Rate (Rs./MWh)

8 Payment Schedule   **Payment Due Date:**

i) Transmission Charges

Trans. System	Rate (Rs/MWh)	MWh	Total(Rs)
(a)intra-state			
(STU/SEB)			
(STU/SEB)			
(b) Inter-state(PoC Charges)			
Injection Charges(Injection Zone(Name))			
Withdrawal Charges(Withdrawal Zone(Name))			
Total of (i.a+i.b)			

ii) Operating Charges

RLDC/SLDC	Rate (Rs/Day)	Number of days	Total(Rs)
--------SLDC			
------RLDC			
----------RLDC			
Total of (ii)			
iii) Non Refundable application fee (if not paid earlier)			
Grand Total (i+ii+iii)			

9 A curtailed acceptance is being granted on account of …………………………………………..

10 This acceptance is subject to provisions of CERC (Open Access in inter-State Transmission) Regulations,2008 and amendments thereof.

To   **1.<Applicant>**
                    2.<Concerned RLDCs>   **Signature:**
                    3.<Concerned SLDCs>   **Name & Designation**
                                                                                        Date: