

FORMAT – 1
APPLICATION FOR GRANT OF OPEN ACCESS
(to be submitted by Open Access Customer)
[See regulations 10.1 (a) & (b) and 16.1]

- | | | |
|--|--------|--|
| 1. Application | No. | Date: |
| 2. Name of the Applicant | : | |
| 3. Address for Correspondence | | |
| Phone No. | (Off): | (Fax) |
| Email id: | : | |
| 4. Category of Applicant
(Please mark as appropriate) | : | Long Terms Open Access
Short Term Open Access |
| 5. Nature (In case of overlapping, please fill in all the relevant items) | | |
| a) Distribution Licensee | : | |
| b) Power fully based on co-generation within the State | : | |
| c) Power fully based on wind | : | |
| d) Power fully based on hydro and wind | : | |
| 26. e) Power fully based on non-conventional / renewable sources of energy other than hydro and wind. | : | |
| 27. f) Power from captive generation based on gas | : | |
| 28. g) Power from captive generation based on coal | : | |
| 29. h) Power from captive generation based on oil | : | |
| i) Other sources, if any not covered under (a) to (g) | : | |
| (Licensees to submit licences valid under the Act. Others to submit documentary evidence in support of above). | | |
| 6. Coordinator Details – Applicant | | |
| Name | : | |
| Designation | : | |
| Phone Numbers | : | (Off): (Res): |
| | | (Fax): (Mobile): |
| | | e-mail id : |

7. Capacity Applied

Period		Time Period		Capacity needed / Max. power to be conveyed (MW)
From (Date)	To (Date)	From (Hrs.)	To (Hrs.)	

8. Injecting Agency Details

Name :

Point of Injection :

Name of concerned SLDC :

9. Drawee Agency Details

Name :

Point of Drawal :

Name of concerned SLDC :

10. Name and details of other agencies involved, if any :

11. Non-Refundable Application Fee in terms of regulation (3)
(Please mark as appropriate)

Long Term Open Access :

Short Term Open Access :

Bank Draft / Pay Order No.

Dated:

In favour of :

Payable at :

12 Short notes may be attached covering the following (to the extent relevant):

- a) Generation planned.
- b) Power purchase contracted.
- c) Power factor.
- d) Potential hazards concerning public safety in line with the Environment (Protection) Act, 1986 and other applicable laws.
- e) Reactive compensation programme.
- f) Harmonic distortion.
- g) Peak load.
- h) Average load.
- i) Periods with time slab in line with concerned Grid Code(s).
- j) Any other information as may be required.

13. (a) It is hereby certified that all agencies (including buyer, seller, trader etc.) to the transaction shall abide by the provisions of the “West Bengal Electricity Regulatory Commission (Open Access) Regulations, 2007”.
- (b) The applicant hereby agrees to keep the concerned SLDC, STU, Transmission Licensee and Distribution Licensee indemnified at all times and undertakes to indemnify, defend and save the concerned SLDC, STU, Transmission Licensee and Distribution Licensee harmless from any and all damages, losses, claims and actions relating to injury to or death of any person or damage to property, demands, suits, recoveries, costs and expenses, court costs, attorney fees, and all other obligations by or to third parties, arising out of or resulting from the transactions under this Approval.
- (c) Any other information / details that may be required by the concerned Transmission Licensee(s) / STU / SLDC / Distribution Licensee shall be provided promptly by the applicant.

Signature:

Place:

Name:

Dated:

Designation:

Seal of the office of the Applicant:

Annexure – 1
(Concluded)

Enclosures:

1. Copy of Agreements / MOUs.
2. Bank draft / Pay Order.
3. Copy of Licence / supporting documents, as applicable.
4. Notes (Please see Item 12).

Copy:

- a) SLDC (if different from the Nodal Agency)
- b) Transmission Licensee (if different from the Nodal Agency and who owns the transmission line through which power is to be transmitted).
- c) Distribution Licensee (if different from the Nodal Agency and in whose distribution network the point of drawal of power is located).

Note: In the event the application is made under regulation 10.1(b), full particulars relating to the intervening transmission facility are to be provided in the application.

Date & Time of Receipt of Application	(To be filled in by Nodal Agency)
---------------------------------------	-----------------------------------

FORMAT – 2
 CONSENT FOR OPEN ACCESS
 (to be issued by Nodal Agency / SLDC)
 [See regulations 10.3 (a) & (b) and 16.2]

- | | | |
|----|---|-------|
| 1. | Consent No. | Date: |
| 2. | Name of the Customer | : |
| 3. | Name of Injecting Agency | : |
| 4. | Name of Drawee Agency | : |
| 5. | Name of other Agencies involved, if any | : |
| 6. | open access Capacity Applied | : |

Period		Time Period		Capacity needed / Max. power to be conveyed (MW)
From (Date)	To (Date)	From (Hrs.)	To (Hrs.)	

7. open access Capacity Approved

Period		Time Period		Capacity needed / Max. power to be conveyed (MW)
From (Date)	To (Date)	From (Hrs.)	To (Hrs.)	

8. Point of Injection

9. Point of Drawal

10. Name of concerned SLDC

11. Name of concerned ALDC

12. This approval is subject to full payment of requisite charges made by applicant on or before the due date as specified by the West Bengal Electricity Regulatory Commission.

13. This approval is subject to

(a) The Licensee holding a licence valid under the Act,

(b) The West Bengal Electricity Regulatory Commission (Open Access) Regulations, 2007.

- (c) The responsibility of ensuring compliances with the provisions of the Electricity Act, 2003, applicable Rules and Regulations / Codes shall lie with the Applicant / Open Access Customer.
- (d) Signing of an Agreement / MOU and furnishing of following information:

Agreement / MOU Details (needs to fill up only relevant agreement details)

With	No.	Date	Valid upto	Max. MW	Capacity already Utilized earlier	Balance MW
------	-----	------	------------	------------	--------------------------------------	---------------

Signature:

Place:

Name:

Dated:

Designation:

Seal of the office of the Nodal Agency / SLDC

To:

(Applicant) -----

Copy:

- a) SLDC (if different from the Nodal Agency)
- b) Transmission Licensee (if different from the Nodal Agency and who own the transmission line through which power is / are to be transmitted).
- c) Distribution Licensee (if different from the Nodal Agency and in whose distribution network the point of drawal of power is located).

)

FORMAT – 2A
DECISION ON OPEN ACCESS, WHERE IMMEDIATE
OPEN ACCESS CANNOT BE GRANTED
(to be issued by Nodal Agency / SLDC)
[See regulation 10.3 (a) & (b) and 16.2]

- 1. Name of the Customer :
- 2. Name of Injecting Agency
- 3. Name of Drawee Agency :
- 4. Name of other Agencies involved, if any :
- 5. open access Capacity Applied :

Period		Time Period		Capacity needed / Max. power to be conveyed (MW)
From (Date)	To (Date)	From (Hrs.)	To (Hrs.)	

- 6. open access cannot be granted immediately due to the following reasons:
(Attached sheets, if required, including extracts of relevant correspondence with appropriate Licensees)

Signature:

Place:

Name:

Dated:

Designation:

Seal of the office of the Nodal Agency / SLDC:

Annexure 2
(Concluded)

To:

(Applicant) -----

Copy:

- (a) SLDC (if different from the Nodal Agency)
- (b) Transmission Licensee (if different from the Nodal Agency and who own the transmission line through which power is / are to be transmitted).
- (c) Distribution Licensee (if different from the Nodal Agency and in whose distribution network the point of drawal of power is located).