**INFORMATION REQUEST SHEET: EDAMEIMIA**

**CAISO Tariff Appendix B.31**

**To initiate an Extended Day-Ahead Market Entity Implementation Agreement,   
please submit this form to** [**RegulatoryContracts@caiso.com**](mailto:RegulatoryContracts@caiso.com)

***All information must be complete before an agreement will be processed.***

PLEASE SUBMIT THIS FORM IN **WORD** FORMAT

**A Balancing Authority** that seeks to become an EDAM Entity must **first** execute an*EDAM Entity Implementation Agreement* with the CAISO that establishes the EDAM Entity Implementation Date, an obligation to sign an *EDAM Addendum to EIM Entity Agreement*, the onboarding fee for its implementation, and the scope of work required for its participation in the EDAM.

|  |  |
| --- | --- |
| Balancing Authority full legal name (agreement holder) | (Please confirm legal spelling, including capitalization and punctuation) |
| EDAM Entity Implementation Date |  |
| Legal address |  |
| **(Schedule 1)**  Name of primary representative |  |
| Title |  |
| Company |  |
| Address  (Street address is required) |  |
| City/State/Zip code |  |
| Email address |  |
| Phone |  |
| Fax |  |
| Name of alternative representative |  |
| Title |  |
| Company |  |
| Address  (Street address is required) |  |
| City/State/Zip code |  |
| Email address |  |
| Phone |  |
| Fax |  |

|  |  |
| --- | --- |
| Name of Billing Representative |  |
| Title |  |
| Email address |  |
| Phone |  |

**REQUIRED FOR ELECTRONIC SIGNATURE PROCESS:**

|  |  |
| --- | --- |
| Name of signatory |  |
| Email address |  |