**INFORMATION REQUEST SHEET: EDAMTSPA**

**CAISO Tariff Appendix B.33**

**To initiate an Extended Day-Ahead Market Transmission Service Provider Agreement, this form must be submitted via CIDI. If you do not have access to CIDI, please contact your User Access Administrator (UAA). The procedure to submit CIDI documentation can be found here:**[**http://www.caiso.com/Documents/How-to-Submit-Documentation-for-Applications-and-Ongoing-Obligations.pdf**](http://www.caiso.com/Documents/How-to-Submit-Documentation-for-Applications-and-Ongoing-Obligations.pdf)

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

PLEASE SUBMIT THIS FORM IN **WORD** FORMAT

An EDAM Transmission Service Provider must execute an ***EDAM Transmission Service Provider Agreement*** with the CAISO and have a Scheduling Coordinator for purposes of interfacing with the CAISO.

|  |  |
| --- | --- |
| EDAM Transmission Service Provider (full legal name) | (Please confirm legal spelling, including capitalization and punctuation)      |
| 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 |       |

**REQUIRED FOR ELECTRONIC SIGNATURE PROCESS:**

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