

# Application Details

Application ID: 14



## Open Access Application Form

Term

Instructions

Contract Person

Full Name

Title

Physical Address

Cell Phone Number

Email Address

This Application is for a grant of:

Details of Energy Regulation Board Licences held if any held by the applicant:

## **SECTION B: Capacity and Injection Details**

1. Details of Capacity and Period:

(a) Capacity applied for (MVA/MW):

(b) Average demand (MVA/MW):

(c) Period for which Use of System is applied for:

2. Injection Point Details:

(a) Name of Utility:

(b) Voltage level (kV):

(c) Capacity of Connection required (MVA):

(d) Short Circuit Level (MVA):

(e) Name of Substation and Feeder:

3. Drawing Point Details:

(a) Name of Users:

(b) Voltage level (kV):

(c) Capacity of Connection required (MVA):

(d) Short Circuit Level (MVA):

(e) Name of Substation and Feeder:

(f) Other Transmission System connections:

(g) Does drawer have other points of Transmission connection:

## SECTION C: Attachments

Please tick to show that the required document is attached. After finalizing, please date and sign the attached checklist and send it together with the application.

(i) ZRA Tax clearance certificate YES ( ) NO (✓)

(ii) Declaration of funds to support financial viability YES ( ) NO (✓)

(ii) Declaration of funds to support financial viability YES ( ) NO (✓)

## SECTION D: DECLARATION BY APPLICANT

I,  hereby declare that all information provided herein is within my personal knowledge and that:

- (a) I am duly authorised to make this declaration;
- (b) I am the designated person responsible for this application;
- (c) I have read and understood this form and all accompanying regulations related hereto; and
- (d) all information provided herein is, to the best of my knowledge, true and correct.

Signed at:

Date

Download as PDF

Approve

Reject

[request for Additional Details](#)