



Western Area Power Administration
 Rocky Mountain Region
 Network Integrated Transmission Service

Designated Network Resources Submittal Form

Network Customer:		
Company Name:		
Requestor Name:		
Title:		
Business Address:		
Telephone:		
Fax:		
E-mail		
Affiliate of Western?	YES	NO

	Name of Resource	Geographic and Electrical Location	Total Installed Capacity	Designated Capacity (MW)
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				

E-mail Addresses:

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