



CRITICAL ENERGY INFRASTRUCTURE INFORMATION (CEII) REQUEST FORM

This form shall be submitted to the attention of Transmission Planning by fax, email or mail:

Fax: 709-737-1318
 E-Mail: transmissionservices@nlh.nl.ca
 Mailing Address: Newfoundland & Labrador System Operator
 Hydro Place, 500 Columbus Drive
 P.O. Box 12400, STN A. St. John's, NL A1B 4K7

REQUESTER'S INFORMATION	EMPLOYER/CLIENT INFORMATION
Requester's name & title:	Name of entity on whose behalf request is filed:
Requester's address:	Address of entity listed above:
Requester's phone number:	Phone number of entity listed above:
BUSINESS REFERENCE(S)	
Name:	Phone #:
Name:	Phone #:
DESCRIPTION OF INFORMATION REQUESTED:	

STATEMENT OF NEED PURSUANT TO THE TRANSMISSION PLANNING PROCESS, please include:

- a. The extent to which a particular function is dependent upon access to the information.
- b. Why the function cannot be achieved or performed without access to the information; an explanation of whether other information is available to the requester that could facilitate the same objective.
- c. How long the information will be needed.
- d. Whether or not the information is needed to participate in a specific proceeding (with that proceeding identified).
- e. Explanation of whether the information is needed expeditiously.

DRAFT

ARE YOU WILLING TO SIGN AND ABIDE BY AN APPROPRIATE AGREEMENT LIMITING YOUR USE AND DISCLOSURE OF THE INFORMATION REQUESTED?

Yes No

I HEREBY ATTEST TO THE ACCURACY OF THE INFORMATION PROVIDED IN THIS CEII REQUEST FORM.

Signature:

Date: