

**Southwest Transmission Cooperative, Inc. Point to Point Transmission Service**

**Application Form**

1. The Identity, address, telephone number and facsimile number of the entity requesting service:

Identity:  
Contact:  
Address:  
Telephone Number:  
Facsimile Number:

2. Statement that the Entity requesting service is, or will be upon commencement of service, an Eligible Customer under the Tariff:

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3. Location of the Point(s) of Receipt and Point(s) of Delivery and the identities of the Delivering Parties and the Receiving Parties:

<b>Point(s) of Receipt</b>	<b>Delivering Parties</b>	<b>Point(s) of Delivery</b>	<b>Receiving Parties</b>

4. Location of the Generating Facility(ies) supplying the capacity and energy and the location of the load ultimately served by the capacity and energy transmitted:
5. Description of the supply characteristics of the capacity and energy to be delivered:
6. Estimate of the capacity and energy expected to be delivered to the Receiving Party(ies):
7. Service Commencement Date and the term of the requested Transmission Service:
8. Transmission capacity requested for each Point of Receipt and each Point of Delivery on the Transmission Provider's Transmission System.