

NSTAR Electric Company

Form of Application for Network Integration Transmission Service

This Application for Network Integration Transmission Service is submitted to NSTAR Electric Company (Transmission Provider) by the entity identified below:

1. Name and address of entity requesting service.

Name: _____

Address: _____

Telephone: (____) _____

2. Basis of qualification as an entity eligible to receive service under the Tariff.

3. Requesting entity designated contact person:

Name: _____

Title: _____

Address: _____

Telephone: (____) _____

Fax number: (____) _____

4. Is the requesting entity a NEPOOL Participant?

_____ Yes

_____ No

5. Attach a description of the Network Load.

This description should separately identify and provide the requesting entity best estimate of the total loads to be served at each transmission voltage level, and the loads to be served from each NSTAR Electric Company substation at the same transmission voltage level.

The description should include a ten (10) year forecast of summer and winter load and resource requirements beginning with the first year after the service is scheduled to commence. Load projections should not be reduced to reflect any portion of such load served by the output of any generating facilities that could affect the metered power flow to the Point of Delivery.

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6. List proposed Point(s) of Delivery.

Point(s) of Delivery: _____

List of Metering Point(s) when they differ from Point(s) of Delivery:

7. Describe in an attachment the amount and location of any interruptible loads that are included in the Network Load. This shall include the summer and winter capacity requirements for each interruptible load (had such load not been interruptible), that portion of the load subject to interruption, the conditions under which an interruption can be implemented, and any limitations on the amount and frequency of interruptions. A requesting entity should identify the amount of interruptible customer load (if any) included in the 10-year load forecast provided in response to question #5 above.

8. Attach a description of Network Resources connected to the Transmission Customer side of the Point(s) of Delivery (current and 10-year projection), which shall for each network resource, as applicable, include, but not be limited to:

- A. Unit size and amount of capacity from that unit to be designated as Network Resource.
- B. VAR capability (both leading and lagging) of all generators.
- C. Operating restrictions:
 - a. Any periods of restricted operations throughout the year,
 - b. Maintenance schedules,
 - c. Minimum loading level of unit,
 - d. Normal operating level of unit,
 - e. Any must-run unit designations required for system reliability or contract reasons.
- D. Approximate variable dispatch price (\$/MWH) for redispatch computations.

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- E. Arrangements governing sale and delivery of power to third parties from generating facilities located in the NSTAR Electric Company Control Area, where only a portion of unit output is designated as a Network Resource.
- F. Description of purchased power designated as a Network Resource including source of supply, Control Area location, transmission arrangement and delivery point(s) to NSTAR Electric Company Transmission System.

9. Description of requesting entity Transmission System:

Attach the following information:

- A. Load flow and stability data, such as real and reactive parts of the load, lines, transformers, reactive devices and load type, including normal and emergency ratings of all transmission equipment in a load flow format compatible with that used by NSTAR Electric Company.
- B. Operating restrictions needed for reliability.
- C. Operating guides employed by system operators.
- D. Contractual restrictions or committed uses of the requesting entity transmission system, other than the requesting entity Network Loads and Resources.
- E. Location of Network Resources described in question #8 above.
- F. 10-year projection of system expansions or upgrades.
- G. Transmission System maps that include any proposed expansions or upgrades.
- H. Thermal rating of requesting entity Control Area ties with other Control Area.

10. Service commencement date and the term of the requested Network Integration Transmission Service. (Minimum term is one year)

Commencement date: ____/____/____

Requested term: _____

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11. **Attach as an exhibit any other information which will assist the Transmission Provider in evaluating this application.**
12. **Attach as an exhibit evidence from a corporate officer of the requesting entity certifying that it is a viable going concern and has the financial ability to pay the cost of the services contemplated to be provided by the Transmission Provider under the Tariff.**
13. **The requesting entity is including a deposit of \$ _____, which is equal to one month charge.**

14. Certification

The requesting entity hereby represents and warrants that all statements and representation made herein, including any supporting documents, are true to the best of its knowledge and belief. The undersigned officer warrants that the requesting entity agrees to be bound by these representations. The requesting entity further certifies that it has read the complete contents of the Tariff and understands that service provided thereunder is rendered subject to the charges, rates, terms and conditions of service set forth in the Tariff.

The requesting entity understands that the Transmission Provider shall have the right, at any time, unilaterally to file for a change in any of the provisions of the Tariff, including any and all associated schedules and exhibits, in accordance with Section 205 of the Federal Power Act and the Federal Energy Regulatory Commission implementing regulations. In addition, the Transmission Provider may request additional information from the requesting entity which is consistent with 18 CFR 2.20 prior to approving this Application for Service.

- 15. Completed Application should be mailed to the following address:**

**ISO New England Inc.
Attn: Tariff, Schedules and OASIS Dept.;
Supervisor, Tariff Administration;
1 Sullivan Road
Holyoke, MA 01040**

Submitted By:

Requesting Entity: _____

Signature of Officer: _____

Name of Officer: _____

Title: _____

Date Signed: ____/____/____

(To be filled in by NSTAR Electric Company upon receipt)

Date received by NSTAR Electric Company: ____/____/____

Received By: _____