**Please read the ‘NEM Market Ancillary Service Provider and Classification of Load Registration Guide’ when completing this Application**

Please return the completed application to:

Australian Energy Market Operator Ltd

Attention: Onboarding

Level 2, 20 Bond Street
Sydney NSW 2000

**This form should not be altered without the prior consent of *AEMO*.**

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# APPLICANT INFORMATION

## Applicant Details

Applicant / *Registered Participant[[1]](#footnote-1)*: ……………………………………………………………

(full name, eg The First Energy Company Pty Ltd (trading as Energy First))

ABN:………………………………………………………………………………………………

[x]  Mark the relevant box

 The Applicant is applying to become a *Market Ancillary Service Provider (MASP)* in the *National Electricity Market* (NEM)*,*  and to classify *load* *connected* to a *transmission* or *distribution system* to provide *market ancillary services*. (Fill in Sections A, B and C)

OR

 The Applicant is already registered as a *MASP* in the NEM and is applying to classify *load* *connected* to a *transmission* or *distribution* *system* to provide *market ancillary services*.(Fill in Sections A and C)

OR

 The Applicant is already registered as a MASP in the NEM and is applying to amend the relevant *plant* associated with its existing load classification, and/or aggregate further *load* to its existing load classification for the purposes of central dispatch. (Fill in Sections A and C)

The Applicant authorises *AEMO* to contact any organisation named in any attachments to this Application, any *Jurisdictional Regulator,* and any *Network Service Provider* for the purposes of verifying contents of this Application and to enable *AEMO* to satisfy itself that the Applicant is of sufficient standing to meet its obligations under the *Rules,* including the prudential and other requirements established in accordance with the *Rules*.

## Declaration

**I ………………………………………………………………………………………………………..**

(insert name)

**…………………………………………………………………………………………………………**

(insert title)

DECLAREthat I am authorised by the Applicant to submit this Application on the Applicant’s behalf and certify that the contents of this Application and any further submission are true and correct.

|  |  |
| --- | --- |
| ……………………………………………………………………………… | ……/……/20…… |
| Signature | Date |

# APPLICATION FOR REGISTRATION AS A MARKET ANCILLARY SERVICES PROVIDER

## Contact Details

### Contact Details for Head Office and any Branch Office/s

Please provide the following details for the Head Office and any Branch Office/s:

|  |  |
| --- | --- |
| Office Name\* |  |
| Street Address |  |
| State |  | Postcode |  |
| Postal Address |  |
| State |  | Postcode |  |
| Phone |  | Email |  |

\* Type “Head Office” or name of branch

### Details of Relevant Personnel Contacts

For each relevant personnel contact within your organisation, please provide details as outlined in the table below.

Compulsory contacts: Contact details for these roles must be provided:

|  |  |
| --- | --- |
| Company Secretary | Communications – Corporate Relations Manager |
| Head of Organisation (MD/CEO) | Communications – Crisis Contact |
| Registration Contact  | NEM Primary Contact |
| Dispute Management Contact | NEM Observer |
| Settlements – Correspondence (Primary) | Settlements – Correspondence (Secondary) |
| Information Systems – IT Security Contact (Primary) | Information Systems – IT After Hours / Emergency Contact (Primary) |
| Information Systems – IT Security Contact (Secondary) | Information Systems – IT After Hours / Emergency Contact (Secondary) |
| Information Systems - IT Technical Network Contact | 24 hour/Emergency contact – Operational contact |

Additional contacts: Required if you have *scheduled load*

|  |  |
| --- | --- |
| Operations – Trading Manager | Operations – Manager |
| Operations – Bidding Contact | Operations – Shift Supervisor |

For each relevant personnel contact, please provide the following details:

|  |  |
| --- | --- |
| Contact Type (see lists above) |  |
| Name (e.g. Dr George William Smith) |  |
| Position |  | Branch |  |
| Phone |  | Email |  |
| Mobile |  | Assistant |  |

🖈 You will need to submit additional pages to include all of your contact details. Please clearly mark these as ‘***Attachment to Section B.1***’ and number each page consecutively.

## Additional information

If the Applicant is applying to become a *Registered Participant* in the NEM, the Applicant needs to include the following information and attach it to the application. If all items below are not addressed, please provide reasons why in writing.

[x]  Mark where included

1. Evidence of partnership status

 if you are applying for registration on behalf of a partnership, you must provide evidence of the legitimacy of the partnership, such as a partnership agreement

1. Regulatory compliance

 copy of current electricity licence/approval in one or more *NEM* jurisdictions, or evidence of exemption from registration, such as a letter from the relevant *Jurisdictional Regulator*, including copies of relevant exemptions or derogations (if applicable)

 details of any non-compliance with regulatory obligations (if applicable)

1. Financial viability

 explanation of financial links with parent organisations and other organisations that may improve the financial viability of the Applicant

1. Organisational capability

 organisation chart or other evidence of access to necessary expertise to comply with Rules

 brief resumes of key personnel and information about their responsibilities (if not included in the organisational chart)

 demonstration that *NEM*-related policies and procedures are in place (you must submit a list, actual copies are not required)

 IT systems to support *NEM* activities

 if the Applicant has not participated in the NEM before but has participated in another relevant market, copies of electricity licences (if any) held in related markets, duration of activity in the market, sales volumes and number of customers

 explanation of links with parent organisations and other organisations that impact on or improve the Applicant’s ability to comply with the *Rules*

🖈 Please clearly mark attachments as ‘***Attachment to Section B.2***’ and number each page consecutively.

## Information Required for AEMO’S Market Systems

Will the Applicant be using an existing Participant ID?

 Yes Existing Participant ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

 No Please complete this sections B.3.1, B.3.2 and B.3.3.

### Austraclear

|  |  |
| --- | --- |
| Austraclear Membership Number (e.g. AAAA11) |  |

### Participant ID

|  |  |
| --- | --- |
| Suggested Participant ID (Maximum 8 characters) |  |

###

### MarketNet Connection

For details regarding options and entitlements for connections to AEMO’s communications network, including requests for additional bandwidth, please refer to the [Guide to Information Systems](http://www.aemo.com.au/-/media/Files/IT_Changes/Guide-to-Information-Systems-v2-03-Apr-2014.pdf), available from the AEMO website.

Will the Applicant be using an existing MarketNet connection?

 Yes → You have finished Section B.

 No → the Applicant requires new connection(s) of the following types:

[x]  Mark where required

**Primary Connection**

AEMO recommends “VPN (VIRTUAL PRIVATE NETWORK) LAN TO LAN” as the Primary Connection method (fast setup and uses your existing internet connectivity).

|  |  |
| --- | --- |
|  VPN (Virtual Private Network) LAN to LAN VPN Variable |  Telstra Ethernet Lite (BDSL) Allow up to 2 months for Setup. |

**Secondary Connection**

Secondary connection method should be different from the Primary connection, to support path diversity.

|  |  |
| --- | --- |
|  VPN (Virtual Private Network) LAN to LAN VPN Variable |  Telstra Ethernet Lite(BDSL) Allow up to 2 months for Setup. |

# APPLICATION TO CLASSIFY LOAD CONNECTED TO A TRANSMISSION OR DISTRIBUTION SYSTEM TO PROVIDE MARKET ANCILLARY SERVICES

If you are already registered or registering as a *MASP* and are classifying load, please complete this section.

Please duplicate and complete this form for each *ancillary service load*.

## Ancillary service load

|  |  |
| --- | --- |
| ***Load* name** |  |
| ***Dispatchable unit identifier(s) (DUID)*** | Will the Applicant be using an existing DUID? Yes Existing DUID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. No Suggestd new DUID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. |
| ***Region*** |  |

### Roles

Please indicate which role(s) the Applicant will be acting in, in relation to the load:

 Owner

 Operator

 Controller

If the Applicant will not be acting as Owner, Operator or Controller, please advise who will be (where there are multiple parties acting in a particular role, you may attach a separate list):

Owner…………………………………………………………………………………………

 (Company Name and ABN)

Operator………………………………………………………………………………………

 (Company Name and ABN)

Controller……………………………………………………………………………………..

 (Company Name and ABN )

|  |
| --- |
| Please demonstrate how load identified in this application are under the Applicant’s ownership, operation or control:     |

### Declarations

Mark [x]  in the following boxes if applicable:

 The Applicant confirms that the load being classified is a *load*.

 The Applicant confirms that *performance standards* for the load are in place.

 The Applicant confirms that appropriate arrangement(s) are in place with retail customer(s) at the relevant connection point(s).

 The Applicant confirms that the load complies with the *MASS*.

If one or more of the boxes above are not marked, please provide details why.

### Market ancillary services

Please provide details of the *market ancillary services* that the applicant is seeking approval to provide using the table below.

For all Regulation and contingency Frequency Control Ancillary Services relating to the MASP category, the mimimum and maximum enablement levels will be 0 MW and the maximum lower and upper angles will be 90 degrees.

|  |  |  |  |
| --- | --- | --- | --- |
| **Frequency Control Ancillary Services** | Service provided (Y/N) | Switching controller(Y/N) | Maximum m*arket ancilliary service* capacity (MW) |
| Fast Raise Service (RAISE6SEC) |  |  |  |
| Fast Lower Service(LOWER6SEC) |  |  |  |
| Slow Raise Service (RAISE60SEC) |  |  |  |
| Slow Lower Service (LOWER60SEC) |  |  |  |
| Delayed Raise Service (RAISE5MIN) |  |  |  |
| Delayed Lower Service (LOWER5MIN) |  |  |  |
| Regulating Raise Service (RAISEREG) |  |  |  |
| Regulating Lower Service (LOWERREG) |  |  |  |

## Application to register the control equipment

### Determination of ancillary services information

|  |
| --- |
| **Determination of ancillary services information** |
| Please mark appropriate boxes below to indicate the basis on which the ancillary services information has been determined, and provide further details where required: |
|   | The load design parametersThe services previously provided under an ancillary services agreementThe results of testsMathematical modelling of the plantOther (please describe):    |

### Controls, communications and telemetry information

|  |
| --- |
| **Controls, communications and telemetry information** |
| Please describe the facility installed to receive dispatch instructions for the enablement of each ancillary service from *AEMO’s* market systems. For example, how will the Market Ancillary Services Provider find out when the ancillary services are enabled for the load by *AEMO’s* market systems? Does the plant operator have access to *AEMO’s* market systems, or does the plant operator rely on an alternate system/person telling them when necessary?     |
| Please describe the control facilities installed for each *ancillary service* in accordance with the *market ancillary service specification*, including communications and telemetry, where applicable. For example, are the fast and slow services to be provided by variable controllers or switching controllers? Are the Regulation services to be provided in response to setpoints or raise/lower pulses? Is the plant controlled from a location other than the plant to provide these services?     |
| Please describe the monitoring and recording facilities installed for each ancillary service in accordance with the *market ancillary service specification*, including communications and telemetry, where applicable. What is the sampling interval of active power and frequency records?     |
| For each controller type (e.g. Battery system controller model, load control model, etc.), provide test data that demonstrates the provision of the services applied for.* Test data should be provided for each category of service applied for (fast, slow and/or delayed, raise and/or lower as applicable)
* For each category of service applied for:
* Test data should be provided showing the response to frequency deviations for at least 3 operating points (10%, 50% and 90%) of the standard frequency ramp defined in the MASS
* Test data and the frequency deviation data should be on a common time scale
* The resolution of the data should conform to the MASS
* If the controller allows the reversal of power (e.g. battery systems), the above tests should be repeated to demonstrate performance under reversal of power.

      |

##

## Details of the relevant *plant* that forms the ancillary services load

### Changes to relevant *plant* that form the ancillary services load

Provide the following information:

Please increase the number of rows if required.

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Change type (add/ modify / delete) | NMI at installed site | Confirm site is under ownership, operation and/or control of the MASP (Y/N) | Postalcode of installed site | NEM Region | DNSP or TNSP | Device manufacturer | Device model / version | Device control box model / version | Device size (kWh) | Max raise capability (kW) = max (fast, slow and/or delayed) | Max lower capability (kW) = max (fast slow and/or delayed) |
|  |  |  |  |  |  |  |  |  |  |  |  |
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### Complete list of relevant *plant* that form the ancillary services load

Provide a complete list of *plant* that form the ancillary services load taking into account the changes listed in C.3.1.

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| NMI at installed site | Confirm site is under ownership, operation and/or control of the MASP (Y/N) | Postalcode of installed site | NEM Region | DNSP | Device manufacturer | Device model / version | Device control box model / version | Device size (kWh) | Max raise capability (kW) = max (R6,R60,R5) | Max lower capability (kW) = max (R6,R60,R5) |
|  |  |  |  |  |  |  |  |  |  |  |
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🖈 Please clearly mark attachments as ‘***Attachment to Section C***’ and number each page consecutively.

**– End of Application –**

1. Italicised terms are defined in the National Electricity Rules. [↑](#footnote-ref-1)