

DECLARATION OF RULE PARTICIPANT REGISTRATION

General Information

This form is to be completed by an Applicant or an existing Rule Participant intending to register in one or more Rule Participant classes in the Western Australian Wholesale Electricity Market.

Applicant Information

1. Applicant details

a) Participant short name in the Western Australian Wholesale Electricity Market System (WEMS):

.....

b) Application for Rule Participant Class: (tick applicable classes)

- Market Generator
- Market Customer
- Network Operator
- Ancillary Service Provider

2. Determination of Applicant's Credit Limit

The Applicant must fill out the details in Appendix 1 of this form in order for AEMO to review the impact to the Applicant's Credit Limit. If you are unable to fill out some of the details, please write "Unable to supply at the present time" on the dotted line.

3. Payment of non-refundable Rule Participant Registration application fee

The Applicant must pay the relevant registration application fee in order for their application to be processed. On receipt of this form AEMO will issue the Applicant with an invoice for the applicable application fee. The schedule of applicable registration fees are detailed below and are inclusive of GST.

| | Fee per registration |
|----------------------------|----------------------|
| Market Generator | \$1,130 |
| Market Customer | \$1,130 |
| Network Operator | \$1,130 |
| Ancillary Service Provider | \$1,130 |

Payment can be paid via cheque or by direct deposit into the AEMO's bank account. Payment instruction details can be found at the following link:



<http://www.aemo.com.au/Electricity/Wholesale-Electricity-Market-WEM/Settlements-and-prudential-monitoring/Credit-support-and-reserve-capacity-security>

The Applicant should provide a remittance advice from your bank if you have paid by direct deposit or include sufficient details in the payment description to identify the payer.

Declaration

(To be signed by two Directors of your organisation; or a Director and Company Secretary of your organisation; or if the organisation has only a sole director, by that Director.)

On behalf of (company or business name).....

I declare that the above information constituting this Application is accurate.

(1) Signed: Date:/...../.....

Name:

Position held (circle): Director Company Secretary

Postal address:

.....

Phone: Fax:

Email:

(2) Signed: Date:/...../.....

Name:

Position held (circle): Director Company Secretary

Postal address:

.....

Phone: Fax:

Email:

Appendix 1: Information for Credit Limit Determination

1. Number of customers expected to supply:

2. Expected bilateral contract level per Trading Interval:

3. Estimate of expected generation capacity (MW):

4. Estimate of average consumption (MWh) per Trading Interval:

5. Estimate of expected STEM sales and purchases (MWh) per Trading Interval:

6. Expected level of ancillary service payments per month:

AEMO Contact Information

Assistance

If you need any help to complete this form, please contact Market Operations (WA) by phone on 1300 989 797, or by email to wa.operations@aemo.com.au

Submission

The original form and any supporting documents must be submitted to the AEMO at the following address:

Australian Energy Market Operator
 Market Operations (WA)
 PO Box 7096, Cloisters Square
 PERTH WA 6000