

Application for Critical Load Serving Electric Generation and Cogeneration

CRITICAL LOAD DESIGNATIONS ARE REVIEWED EACH YEAR APRIL 1 FOR SUMMER PEAK and OCTOBER 1 FOR WINTER PEAK

This Application should be completed in order to request the designation of Critical Load Serving Electric Generation and Cogeneration. A separate Application must be submitted to each electric utility provider. Do not include premises served by different electric utilities in a single Application. Multiple premises, served by a single electric utility, may be submitted with a single form, provided that the information requested below is provided for each metered location.

The designation shall only be requested for individual premises (meters) that provide electricity to natural gas production, saltwater disposal wells, processing, storage, or transportation such as a natural gas compressor station, gas control center, or other pipeline transportation infrastructure.

The customer must provide any changes to customer or premise information as soon as practicable. The electric utility may request confirmation of the Critical Load designation and the customer must timely confirm that a premise previously designated as Critical Load continues to qualify for that designation. The utility may request more information prior to implementing the Critical Load designation.

DESIGNATION OF A CRITICAL LOAD DOES NOT GUARANTEE AN UNINTERRUPTED SUPPLY OF ELECTRICITY.

It is the responsibility of the customer to make arrangements for alternative sources of electric power should a localized outage or significant load shed event occur.

UTILITY NAME:

CUSTOMER CONTACT INFORMATION
Contact Name:
Contact Title:
Mailing address (if different from Service Address):

Work Number:
Cell Number:
E-Mail Address:

SERVICE ADDRESS
Customer Name associated with ESI-ID or Premise:
Street (if street address is unavailable, please provide latitude/longitude, any nearby roadway, and/or distance to the closest town)
City
Zip Code
Premise Identifier (e.g., ESIID, Premise Number, Account Number):

Describe equipment or premise served (e.g., production field, midstream processing plant, natural gas storage facility, gas compressor station saltwater disposal well or recycling facility, including the name of the generation unit(s) served by the infrastructure if known) and interdependencies (such as particular fields are tied to a particular midstream processing facility). Information regarding *production rate* (mcf/day) is also helpful:

Average daily production rate served by this premise for the past 12 months:

- $\geq 1,000$ mcf/d
- $< 1,000$ mcf/d and ≥ 250 mcf/d
- < 250 mcf/d

Describe any existing battery or backup capacity, or dual feed capability, including (1) the length of time the facility can operate without electricity from the electric utility and (2) the length of required time for start-up following a power outage:

Name of retail electric provider or electric utility that bills the customer for service:

ELECTRIC UTILITY CONTACT INFORMATION:

AEP Texas: criticalloadaep@aeptx.com
CenterPoint: critical.load@centerpointenergy.com
Oncor: criticalload@oncor.com
TNMP: criticalload@tnmp.com

For contact information for other electric utilities, contact the electric utility listed on the bill you receive for electric service.