

Declaration of Preparedness - Transmission Service Provider
Summer Weatherization

Instructions: Complete this Declaration in its entirety. Leave nothing blank. Add the year in the appropriate spot.

This Declaration must be signed by the highest-ranking representative, official, or officer of the transmission service provider (TSP) *with binding authority* over the TSP attesting to the completion of all applicable activities described in Appendix A and the accuracy and veracity of the information provided herein.

Section 1

Summer 20____
 [year]

TSP Name: _____

This Declaration applies to all transmission facilities listed in Appendix A.

Section 2

TSP conducted the activities listed in Appendix A in connection with the requirements in 16 TAC § 25.55(f)(2).

[Insert summary of activities for each transmission facility in Appendix A]

Section 3

Declaration of Weatherization Preparations

I hereby attest to the following:

1. TSP performed the activities set forth in Appendix A.
2. The maximum ambient temperature at which each transmission facility has experienced sustained operations as measured at the substation or switchyard or the weather station nearest to the substation or switchyard is listed in the Maximum Ambient Temperature column in Appendix A.

[continued on next page]

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I certify I am the highest-ranking representative, official, or officer *with binding authority* over the above-referenced TSP, I am authorized to execute and submit this Declaration and, based on my investigation and review, I attest to the accuracy and veracity of the information provided herein.

Signature

Printed Name

Title

Date

Notary Acknowledgement

STATE OF _____ §

§

COUNTY OF _____ §

Before me, the undersigned notary, on this day personally appeared _____, known to me (or proven to me) to be the person whose name is subscribed to the foregoing Declaration and acknowledged to me s/he executed it for the purposes therein expressed.

Given under my hand and seal this _____ day of _____, 20_____.

Notary Public in and for the State of _____.

[Notary Signature]

(seal)

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Appendix A
(use associated "Summer - Transmission Service Provider Appendix A.xlsx"
spreadsheet)