#### <u>Declaration of Preparedness - Transmission Service Provider</u> <u>Winter Weatherization</u>

**Instructions:** Complete this Declaration in its entirety. Leave nothing blank. Add the year in the appropriate spot (show two years – the year Winter begins and the year it ends; *e.g.*, 2023-24).

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				
Winter	20 to 20			
TSP Na	ame:			
	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)(1).

[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 <u>minimum</u> 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 Minimum Experienced Ambient Temperature column in Appendix A.

[continued on next page]

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above-referenced TSP, I am author	rized to execute ar	rial, or officer with binding authority over the nd submit this Declaration and, based on my 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 _		<del>.</del>		
[Notary Signature]	_	(seal)		

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