

**FAX Attestation Form required for Designated Network TSRs**  
**Form should be faxed to: ITO Tariff Administrator at**  
**501-664-6907**

**CUSTOMER and DNR INFORMATION**

<b>Name</b>	<b>Phone</b>	<b>Check all that apply:</b>  <b>Off-System Resource</b> Yes <input type="checkbox"/> No <input type="checkbox"/>
<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>	
<b>Company</b>	<b>LGEE OASIS TSR #</b>	
<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>	

**ATTESTATION STATEMENTS**

**OWNERSHIP/AVAILABILITY:**

- Required, for pre-confirmed requests, when reservation is submitted to OASIS
- Required, for non-pre-confirmed requests, when the reservation is confirmed

The Network Customer owns the resource, has committed to purchase generation pursuant to an executed contract, or has committed to purchase generation where execution of a contract is contingent upon the availability of transmission service under Part III of the Tariff

The Network Resources do not include any resources, or any portion thereof, that are committed for sale to non-designated third party load or otherwise cannot be called upon to meet the Network Customer's Network Load on a non-interruptible basis

**TRANSMISSION INFORMATION:**

Required, when reservation is submitted to OASIS, if POR is BREC, EEI, EKPC, MISO, OVEC, PJM or TVA.

**External OASIS System Name**

**External OASIS ID #**

  
  

  
  


**Approx Generating Cost (\$/MWH)**

**Operating Restrictions**

**Additional Customer Comments** (not required)

I, \_\_\_\_\_, as the authorized representative of the Network Integration Transmission Service (NITS) customer \_\_\_\_\_ attest to the statements above.

\_\_\_\_\_  
 (Signature)

**ITO USE ONLY:**

**Verified firm off-system transmission service**

(initials)

**Additional ITO comments**