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**APPLICATION FOR PHASE I/II HVDC-TF SERVICE
UNDER SCHEDULE 20A OF THE
ISO-NE OPEN ACCESS TRANSMISSION TARIFF**

PART I – General Terms and Conditions

1.   Name of Applicant: _____
        Address of Applicant: _____
        Telephone No.:   _____
        Fax No.:   _____
        Name of Applicant's Contact Person:_____
        Contact Person Title: _____
        Contact Person Address: _____
        Contact Person Telephone: _____
        Contact Person Fax: _____

        Additional information as registered on TSIN.COM:
        Applicant's company name as registered with NERC: _____
        Transmission Customer Company Code: _____
        Dun and Bradstreet Number: _____

2.   Is the Applicant or will the Applicant, upon commencement of service, be an Eligible
        Customer under the Tariff?

        Yes _____   No _____

3.   Is the Applicant a member of the ISO?

        Yes _____   No _____

4.   Service Requested (Check applicable):

        __Firm   __Non-Firm

        __Resold, Reassigned or Transferred Long-Term Firm   _____ Original TSR No.

5.   Service commencement date and the term of the requested service.

        Commencement date: _____

        Requested term: _____

PART II – Service Specifications

(Complete for Firm & Non-Firm Service)

1. Maximum transaction amount for delivery from the designated Transmission Point(s) of Receipt to the designated Transmission Point(s) of Delivery, regardless of seasonal ratings and hourly variations: _____ kilowatts
    Expected Load Profile: _____
    Hourly _____ Daily _____ Weekly _____ Monthly _____
    Start Date: _____ End Date: _____
    Start Hour: _____ End Hour: _____
    Delivering Party: _____
    Receiving Party: _____
    Transmission Point(s) of Receipt: _____
    Transmission Point(s) of Delivery: _____
    Intervening Transmission System: _____
    Exchange Units: _____

2. Will the requesting entity purchase the Ancillary Services listed in Schedules 3 - 7 of the OATT? Yes _____   No _____

    If no, how will those Ancillary Services be provided by the requesting entity?
    (Check one)

    _____ The requesting entity is a member of the ISO and will directly account for its
             loads and resources and will provide Ancillary Services.

    _____ The requesting entity has arranged for member of the ISO to account for the
             requesting entity's load and resources and to provide Ancillary Services on the
             requesting entity's behalf.

             Please identify the member of the ISO that will perform this function and a
             contact name and phone number at that organization:

                 Name:_____
                 Contact Name:_____
                 Title:_____
                 Business Address:_____
                 Telephone:_____

    _____ The requesting entity has made alternate arrangements satisfactory to the ISO for
             the provision of Ancillary Services.

             Please reference agreement between requesting entity and the provider of these
             services:_____

3. Is any party to the transaction for which Transmission Service is being requested a member of a regional power pooling arrangement? Yes _____   No _____

If yes, please provide the name of the regional power pool(s).

Delivering Party Name: _____

Receiving Party Name: _____

Designated Agent Name:_____

4.   Is requesting entity's request the result of a pending response to an RFP?
Yes _____ No _____

If yes, provide the following information on the RFP solicitation:

Name of Soliciting Entity: _____

Solicitor's Contact Person: _____

Name: _____

Title: _____

Address: _____

Telephone: _____

Date Bids Due: _____

(Complete for Firm Service)

5.   Will the requested Service be relied upon to supply the Receiving Party's entire load at the specified Transmission Delivery Point? Yes _____ No _____

6.   Description of the transaction to be transmitted pursuant to this request.
_____
_____

7.   If the transaction involves an entitlement in a specific resource, is the resource new?
Yes _____ No _____

If the resource is new, the Eligible Customer must attach as an exhibit a map showing the location of the new resource.

Also describe the development status of the new resource.
_____
_____

8.   Electric control area/location of generating facilities where the transaction will originate:
_____

9.   Electric control area in which the Receiving Party is located:
_____

10.   Will the transaction be dispatchable by any regional power pool(s)?
Yes _____ No _____

If yes, name the power pool(s): _____

11. Please describe the dispatchable characteristics of the resource, which is involved in the transaction.

   _____
   _____
   _____

12. Attach as an exhibit evidence from a corporate officer of the requesting entity certifying that it is a viable going concern and has the financial ability to pay the cost of the services contemplated to be provided under the OATT.

13. Attach as an exhibit any other information, which will assist in evaluating this application.

14. The requesting entity is including a deposit of $_____, equal to one month's charge for Reserved Capacity.

(Complete for Non-Firm Service)

15. Purchase _____   Sale _____   Exchange _____
    Is Energy Must Take? _____

16. Does this replace _____ or supplement _____ a previously committed transaction for which Short-Term Service is being provided under the Tariff? If so, please describe that transaction. _____
    _____

17. Is the transaction for backup power? Yes _____   No _____
    If yes, what are contingencies?_____
    _____

18. Applicable Only to Hourly Transactions:

Hour Ending	Transaction Amount (kW)	Hour Ending	Transaction Amount (kW)
1	_____	13	_____
2.	_____	14	_____
3.	_____	15	_____
4.	_____	16	_____
5.	_____	17	_____
6.	_____	18	_____
7.	_____	19	_____
8.	_____	20	_____
9.	_____	21	_____
10.	_____	22	_____
11.	_____	23	_____
12.	_____	24	_____

PART III - Certification

The requesting entity hereby represents and warrants that all statements and representations made herein, including any supporting documents, are true to the best of its knowledge and belief. The undersigned officer warrants that the requesting entity agrees to be bound by these representations. The requesting entity further certifies that it has read the complete contents of the OATT and understands that service provided there-under is rendered subject to the charges, rates, terms and conditions of service set forth in the OATT.

Submitted By: _____

Requesting Entity: _____

Signature of Officer: _____

Name of Officer: _____

Title: _____

Date Signed: _____

(To be filled in by NEP upon receipt)

Date Received by NEP: _____

Received By: _____