NYISO MINIMUM PARTICIPATION CRITERIA OFFICER CERTIFICATION FORM

Cı	usto	mer Nam	e:						
mini Con	imu m itrol	n participa	tion requiren	nents set forth in Sect	ying on this ion 26.1 of <i>I</i>	certificat Attachmen	tion as evidence that Customer meets the t K to the NYISO Market Administration and full authority to bind Customer and further		
1.	tho	se risks th	at could ma		affect Cus	tomer's a	ement policies and procedures that address bility to pay its NYISO invoices when due, ss.		
2.	<u>Tra</u>	<u>ining</u> .							
a. Each employee and agent with the right to Bid or schedule in the NYISO-administered markets on behalf of Customer has appropriate training and/or experience to transact on behalf of Customer in the NYISO-administered markets.									
	b.	successf					actions or TCCs on behalf of Customer has ining course on Virtual Transactions and/or		
3.	effe	ectively res	spond to all	Customer has approp communications and inancial matters.	oriate perso directions f	nnel resou from the N	urces and technical abilities to promptly and NYISO related to settlements, billing, credit		
4.			<u>abilities</u> . Cu ecome due.	ıstomer shall have app	oropriate ex	perience a	and resources to satisfy its obligations to the		
5.	<u>Car</u>		Customer	has demonstrated con	mpliance wi	th the NY I	SO's capitalization criteria as follows (check		
	a.	By submi		of Customer's, or its	guarantor's,	most rec	ent audited annual financial statements that		
			\$10 million	in assets	OR		\$1 million in tangible net worth		
	NY	ISO promp	tly in the eve		al position n	o longer s	ent K that Customer is required to notify the satisfies these minimum capitalization criteria		
	b.			YISO the amount of sort its NYISO credit red		ated belov	w, w hich security Customer acknowledges it		
				Customer is <u>not</u> autho ate in the TCC market			\$500,000; Customer is authorized to participate in the TCC market		
the thos	NY IS se re	SO's Minimequirements	num Particip s. Lacknow Ifter due in	pation Criteria and the ledge that the information	remedies a ation provide ion, by sig	available ted herein ing this	ent K, including those provisions describing to the NYISO of a Participant not satisfying is true and accurate to the best of my belief certification, I acknowledge the potential rtification Form.		
Dat	e:								

	(Signature)
	Print Name:
	Title:
Subscribed and sworn before me	, a notary public of the State of
, in and for the County of	this day of , 20 .
	, tillo
,	, and day or
	, and day or
(Notary Public Signature)	, and day of, 20