

**Applicant Profile Data Application
 Application for Firm Power
 Pick-Sloan Missouri Basin Program -- Eastern Division
 Post-2010 Resource Pool**

1. Applicant Information. Please provide the following:

a. Applicant's (entity/organization requesting an allocation) name and address:

Applicant's Name:	
Address:	
City:	
State:	
Zip:	

b. Person(s) representing applicant:

Contact Person (Name & Title):	
Address:	
City:	
State:	
Zip:	
Telephone:	
Fax:	
Email Address:	

c. Type of entity/organization:

- Federal Agency
- Irrigation District
- Municipal, Rural, or Industrial User
- Municipality
- Native American Tribe
- Public Utility District
- Rural Electric Cooperative
- State Agency
- Other, please specify

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d. **Parent entity/organization of applicant, if any:**

e. **Name of the applicant's member organizations, if any:**
(Separated by commas)

f. **Applicable law under which the applicant was established:**

g. **Applicant's geographic service area (if available, please submit a map of the service area and indicate the date prepared):**

h. **Describe whether the applicant owns and operates its own electric utility system.**

i. **Provide the date the applicant attained utility status, if applicable. 10 CFR 905.35 defines utility status to mean "that the entity has responsibility to meet load growth, has a distribution system, and is ready, willing, and able to purchase power from Western on a wholesale basis for resale to retail customers."**

j. **Describe the entity/organization that will interact with Western on contract and billing matters.**

2. Applicant's Loads:

a. **Utility and non-utility applicants:**

(i) **If applicable, provide the number and type of customers served (e.g., residential, commercial, industrial, military base, agricultural):**

Customer Type and Number						
	Residential	Commercial	Industrial	Military	Ag.	Other
Number of customers						
If not applicable, explain why:						

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(ii) Provide the actual monthly maximum demand (kilowatts) and energy use (kilowatt-hours) experienced in calendar year 2007:

Calendar Year 2007						
	January	February	March	April	May	June
Demand <i>(kilowatts)</i>						
Energy <i>(kilowatt-hours)</i>						
	July	August	September	October	November	December
Demand <i>(kilowatts)</i>						
Energy <i>(kilowatt-hours)</i>						

b. Native American Tribe applicants only:

(i.) Indicate the utility or utilities currently serving your loads.

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(ii.) If applicable, provide the number and type of customers served (e.g., residential, commercial, industrial, military base, agricultural):

Customer Type and Number						
	Residential	Commercial	Industrial	Military	Ag.	Other
Number of customers						
If not applicable, explain why:						

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- (iii.) Provide the actual monthly maximum demand (kilowatts) and energy use (kilowatt-hours) experienced in calendar year 2007. If the actual demand and energy data are not available or are difficult to obtain provide the estimated monthly demand:

Calendar Year 2007						
	January	February	March	April	May	June
Demand <i>(kilowatts)</i>						
Energy <i>(kilowatt-hours)</i>						
	July	August	September	October	November	December
Demand <i>(kilowatts)</i>						
Energy <i>(kilowatt-hours)</i>						

- (iv.) If the demand and energy data in 2.b(iii.) above is estimated, provide a description of the method and basis for this estimation in the space provided below:

3. Applicant's Resources. Please provide the following information:

- a. A list of current power supplies if applicable, including the applicant's own generation as well as purchases from others. For each supply, provide the resource name, capacity supplied, and the resource's location.

Power Supplies (resource name, capacity & location):

- b. For each power supplier, provide a description and status of the power supply contract (including the termination date):

- c. For each power supplier, provide the types of power:

Power supply is on a firm basis.

Power supply is not on a firm basis. Please explain.

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4. Transmission:

- a. **Points of delivery:** Provide the requested point(s) of delivery on Western's transmission system (or a third party's transmission system) the voltage of service required, and the capacity desired, if applicable.

- b. **Transmission arrangements:** Describe the transmission arrangements necessary to deliver firm power to the requested points of delivery. Include a brief description of the applicant's transmission and distribution system including major interconnections. Provide a single-line drawing of applicant's system, if one is available.

- c. **Provide a brief explanation of the applicant's ability to receive and use, or receive and distribute Federal power as of January 1, 2008.**

5. Other Information:

The applicant may provide any other information pertinent to receiving an allocation.

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6. Signature:

Western requires the signature and title of an appropriate official who is able to attest to the validity of the APD and who is authorized to submit the request for an allocation.

By signing below, I certify the information which I have provided is true and correct to the best of my information, knowledge and belief. Electronically submitted applications must contain an electronic signature, or in the alternative, the signature page with a signature should be faxed or e-mailed.

Signature_____ Title_____

Applications may be submitted by U.S. mail to the address below or electronically to UGPPost2010@wapa.gov with an electronic signature. If submitting this application electronically and an electronic signature is not available, please fax this page with a signature to (406) 247-7408, or mail to Robert J. Harris, Regional Manager, Upper Great Plains Region, Western Area Power Administration, 2900 4th Avenue North, Billings, Montana, 59101-1266.

RECORD KEEPING REQUIREMENTS: If Western accepts your application and you receive an allocation of Federal power you must keep all your records associated with your APD for a period of 3 years after you sign your contract for Federal power. If you do not receive an allocation of Federal power, there is no recordkeeping requirement.

Western has obtained an OMB Control Number 1910-5136 for the collection of the above information.