

WAPAF 250
(11/24)

APPLICANT PROFILE DATA

All items of information in the Applicant Profile Data (APD) should be answered as if prepared by the entity/organization seeking the allocation of Federal power from Western Area Power Administration (WAPA). The APD shall consist of the following:

1. Applicant Information. Please provide the following:

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

Name:	
Address:	
City:	
State:	
Zip:	

b. Person representing the applicant:

Contact's Name:	
Contact's Title:	
Address:	
City:	
State:	
Zip:	
Telephone:	
Fax:	
E-mail Address:	

c. Type of entity/organization (select one):

- Electric Cooperative
- Federal Agency
- Irrigation District
- Joint Power Authority
- Municipality
- Native American Tribe
- Public Utility District
- Rural Water User Association
- State Agency
- Other, please specify: _____

d. Parent entity/organization of the 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 C.F.R. Part 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 WAPA on a wholesale basis for resale to retail consumers." (Format: MM/DD/YYYY)

j. Describe the entity/organization that will interact with WAPA on contract and billing matters (include contact person, email, and telephone number).

2. Service Requested.

- a. Provide the annual amount of power the applicant is requesting to be served by WAPA.**

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

- a. For non-utility applicants, including Native American Tribes without utility status, indicate the utility or utilities currently serving your loads:**

- b. If applicable, provide the number and type of customers served (e.g., residential, commercial, industrial, military base, agricultural) or the specific load to be served by the allocation:**

Customer Type and Number

	Residential	Commercial	Industrial	Military	Ag	Other
Number of Customers						

If not applicable, explain why?

- c. Provide the actual monthly maximum demand (kilowatts) and energy use (kilowatt-hours) for each calendar month experienced in calendar year 20____:**

If the actual demand and energy data are not available or are difficult to obtain provide the estimated monthly demand.

	January	February	March	April	May	June
Demand (kilowatts)						
Energy (kilowatt-hours)						

	July	August	September	October	November	December
Demand (kilowatts)						
Energy (kilowatt-hours)						

- d. If the demand and energy data in (c) above is estimated, provide a description of the method and basis for this estimation in the space provided below:
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- e. Provide the annual load factor for calendar year 20____:
If the actual load factors are not available, provide the estimated load factors.
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- f. Provide the monthly load factors for calendar year 20____:
If the actual load factors are not available, provide the estimated load factors.

	January	February	March	April	May	June
Load Factor						

	July	August	September	October	November	December
Load Factor						

- g. If the load factor data in (f) above is estimated, provide a description of the method and basis for this estimation in the space provided below.
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- h. Identify any factors or conditions in the next 5 years which may significantly change peak demands, load duration, or profile curves.
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4. Applicant's Resources. Please provide the following information:

- a. List 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.**

No.	Name	Capacity (MWs)	Location
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

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

No.	Name	Description	Type of power supplied (Firm or non-firm)	Termination Date (MM/DD/YYYY or "N/A" if no termination date)
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

- c. For each power supplier that is non-firm, please explain:**

5. Transmission.

a. Points of delivery.

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

Requested Point(s) of Delivery	Voltage Required (kV)	Capacity (MWs)

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 [date].

6. Other Information.

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

7. Signature: WAPA requires the signature and title of an appropriate official who is able to attest to the validity of the data 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.

Print Name: _____ Title: _____

Signature _____ Date: _____

Organization: _____

Applications may be submitted by U.S. mail to the address below or electronically to xxxxxxxxx@wapa.gov with an electronic signature. If submitting this application electronically and an electronic signature is not available, please fax, upload, or otherwise transmit this page with a signature to [xxx-xxx-xxxx](tel:xxx-xxx-xxxx), or mail it to [xxxx](#) Region, Western Area Power Administration, Attention (Mail Code), Address, State, City, Zip Code.

If available, please remember to attach your geographic service area map (as stated 1g) and single line transmission system drawing (as stated in 5b).

RECORDKEEPING REQUIREMENTS: If WAPA accepts your application and you receive an allocation of Federal power you must keep all 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.

WAPA has obtained an OMB Clearance Number 1910-5136 for the collection of the above information.

This data is being collected to enable WAPA to properly perform its function of marketing limited amounts of Federal hydropower. The data you supply will be used by WAPA to evaluate who will receive an allocation of Federal power.

Public reporting burden for this collection of information is estimated to average 8 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Ronald J. Klinefelter, Paperwork Reduction Act Comments, Western Area Power Administration, P.O. Box 281213, 12155 W. Alameda Parkway, Lakewood, CO 80228; and to the Office of Management and Budget (OMB), OIRA, Washington, DC 20503.

Notwithstanding any other provision of the law, no person is required to respond to, nor shall any person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a currently valid OMB control number.

Submission of this data is voluntary, however if an entity seeks an allocation of Federal power, the applicant must submit an APD.