# Confirmation and Signature

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| This form labelled “Confirmation and Signature’’ must be printed and signed by a lawfully appointed director of the Party. Once signed, the document must be scanned and uploaded to the Confirmation and Signature section of the Capacity Market Platform. Confirmation and Signature forms should be returned no later than the Qualification Application Date stated in the Capacity Auction Timetable. |

* Full details of the application requirements are provided in the “Capacity Market - Qualification Data Guide" and the Capacity Market Code Agreed Procedure 3 “Qualification and Auction Process”. Both can be found on the SEMO website.
* Not all forms or supporting information may be relevant to all Candidate Unit or Combined Candidate Unit qualifications. Details of the relevancy of documentation are provided in the checklist below.
* Please use this checklist to ensure you have submitted all the required documentation with your Candidate Unit or Combined Candidate Unit qualification application.

## Summary

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| --- | --- | --- |
| Capacity Year |  |  |
| Capacity Auction |  |  |
| Party ID |  |  |
| Party Name |  |  |

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| --- | --- | --- | --- | --- | --- | --- |
| # | **Participant ID** | **CMU ID** | **Candidate Unit ID** | **Gross De-Rated Capacity (Existing) Nominated** | **Gross De-Rated Capacity (New) Nominated** | **Application Status** |
| 1 |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |

(delete/add row as required)

## Checklists

|  |  |  |  |
| --- | --- | --- | --- |
| **CMP location** | **Relevance** | **Submission Format** | **Please tick** |
| Capacity Market – Unit Qualification Application | Required | CMP – Application Form |  |
| Capacity Market - Unit Qualification Data Form CU Detail CU Capacity | Required unless Opt-out submitted | CMP – Application Form |  |
| Capacity Market - Opt Out Notification | Only for Existing Capacity that is required to participate in accordance with CMC E.2.1.1 but does not wish to for reasons set out in CMC E.3.1.1. | Signed, scanned and uploaded to CMP by the Opt Out Notification date detailed in the Capacity Auction timetable. See user guide for instructions. |  |
| Implementation Plan | Required for New Capacity only | CMP – IP form |  |
| Confirmation and Signature | Required | This form must be printed, signed uploaded to confirmation and Signature section in CMP |  |

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| **Supporting Documents** | **Relevance** | **Submission Format** | **Please tick** |
| Capacity Market - Unit Qualification Fee | Not required | Electronic Funds Transfer to SEM Bank |  |
| Exception Application - Unit Specific Price Application | Optional | Submitted to RAs. Dependent on RA requirements |  |
| Exception Application – Maximum Duration > 1 Year for New Capacity | Optional | Submitted to RAs. Dependent on RA requirements |  |
| Evidence of Connection | Required for New Capacity only | Scanned copy uploaded to 'Other Documents' |  |
| Evidence of Aggregation Generation Unit | Required for AGU Existing Capacity only | Please refer to Section E 7.4 CMC for requirements. Scanned copy uploaded to 'Other Documents' |  |
| Confirmation of Allocation of Maximum Export Capacity for Shared Connection Point | Required for Shared Connection Point – (not applicable for DSU) | Scanned copy Scanned copy uploaded to 'Other Documents' |  |
| Emissions calculations for the purposes of assessing compliance with CO2 Limits. | Required | PDF document uploaded to 'Other Documents' |  |
| Other environmental limits | Required where Duration in hours (Annual) is less than 8760 hours | PDF document uploaded to 'Other Documents' |  |

## Confirmations

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|  | I understand that a separate qualification application is required for each Capacity Auction and that this application only covers the registering and qualification for this particular Capacity Auction, as described in Application Details. |
|  | I understand that in order to meet obligations under the Capacity Market Code I will need to have completed the registration of a Candidate Unit in the Balancing Market before the start of any Capacity Year for which the Party has been Awarded Capacity. |
|  | I confirm that the relevant qualification data forms or Opt-Out Notification forms have been completed and will accompany this qualification form. |
|  | I confirm that the required evidence as defined in the Capacity Market Code has been provided to substantiate the qualification application. |
|  | I confirm in respect of Existing Capacity that all necessary consents required (including Planning Permission and Landowner Consents) are currently in place to continue to operate throughout the Capacity Year. |
|  | I confirm on behalf of the Party that, having made due and careful enquiry and to the best of my knowledge, information and belief:   1. the Application for Qualification is not for the purposes of, or in any way connected with, Market Manipulation by the Party or any of its Associates; 2. the Party is not subject to an Insolvency Event; 3. the Party has a good-faith intention to offer the capacity to be Qualified into the relevant Capacity Auction, that none of the capacity proposed to be offered relates to; by way of a prior Capacity Auction or Secondary Trading Auction, existing Awarded Capacity (and that the Participant will not seek awarded capacity for that capacity prior to accepting results of the Capacity Auction) for any period during the Capacity Year; 4. all information in the Application for Qualification and any other information provided to the Regulatory Authorities and the System Operators in relation to it is true correct; 5. the Party has not, and none of its Associates have, engaged or will engage in bribery or has offered or will offer any inducement in regard to the process; and, 6. the Party has taken appropriate steps to ensure appropriate management of Confidential Information. |

## Signature

* This form must be signed by a lawfully appointed director of the Party.
* This signature applies to all included forms and confirmations, and submissions listed above.

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| Director Name (please print) |  |
| Signature |  |
| Date |  |