

**APPLICATION FOR GRANT OF GNA TO ENTITIES OTHER THAN STU UNDER
REGULATION 20.1 AND 20.3 FOR ENTITIES UNDER REGULATION 17.1(II), (III)
AND (V)**

1. **Name of the Applicant** :
2. **Address of correspondence** :
3. **State** :
4. **GST Number** :
5. **PAN No** :
6. **Contact Details**
 - Primary Contact Details**
 - Primary Contact Person Name :
 - Designation :
 - Phone No. (Mobile) :
 - E-Mail :
 - Alternate Contact Details:**
 - Alternate Contact Person Name :
 - Designation :
 - Phone No. :
 - E-Mail :
7. **Nature of applicant:**
 - Drawee entity connected to Intra State Transmission System
 - Distribution licensee seeking to connect to ISTS directly
 - Bulk consumer seeking to connect to ISTS directly
 - Transmission licensee connected to ISTS
8. **Details for General Network Access (GNA)**
 - a. Quantum (MW) of GNA required:
 - Quantum (MW) of GNA within the region: **[A]**
 - Quantum (MW) of GNA outside the region: **[B]**

- Total Quantum (MW) of GNA required: **[C=A+B]. It should be 50MW or more if “Bulk consumer seeking to connect to ISTS directly” OR “Distribution licensee seeking to connect to ISTS directly” is selected at 7 above.**

- b. Start date of GNA: **DD-MM-YYYY (Future date only starting from 1st day of next month)**

- c. End date of GNA (more than 11 months): **DD-MM-YYYY (Future date only. Should be more than 11 months from start date of GNA)**

- d. Intra-state substation including voltage level at which connected: **(for “Drawee Entity connected to intra-state transmission system”)**

- e. ISTS substation including voltage level at which connected: **(for “Transmission Licensee connected to ISTS”)**

- f. Details of nearest 765/400/220/132 kV ISTS sub-stations: **(for “Bulk consumer seeking to connect to ISTS directly” OR “Distribution licensee seeking to connect to ISTS directly”)**

Sub-Station Name:

Voltage levels available:

Owner:

Distance (km):

9. Details of Bank Account for Refund of fee

Beneficiary Account Number:

Beneficiary Account Name:

IFSC Code:

Bank Name:

Branch Name:

10. Details of Documents Enclosed with the Application as applicable

- i. Notarized affidavit as per **FORMAT-AFFIDAVIT**
- ii. Certified true copy of Board Resolution authorizing a person for filing of application, where applicant is a company
- iii. Consent of the concerned STU in terms of availability of transmission capacity in intra-State transmission system for such quantum and period of GNA by drawee entity connected to intra-state transmission system **[Mandatory in case nature of applicant is “Drawee entity connected to Intra State Transmission System”]**
- iv. Copy of licensee issued by appropriate Commission, if case of entity under Regulation 17.1 (iii) and (v), as applicable. **[Mandatory in case nature of applicant is “Distribution licensee seeking to connect to ISTS” OR “Transmission licensee connected to ISTS”]**

I confirm that I am well aware of the CERC Regulations and Detailed Procedure and all the details entered by me are in conformity with the Regulations.

I submit that all the details given in the attached Application for GNA are true and correct and nothing material has been concealed thereof. I hereby agree and acknowledge that in case of any deficiency in the application, I shall have only one opportunity to rectify the deficiencies within the stipulated time period (as per Regulations/Procedure) where after the application shall be liable for rejection at my risk and responsibility.

Submission Date:

Submission Time:

Digital Signature:

[should be Class 3-type i.e. mapped to the company and having a validity for a minimum period of 3 months from date of application]