

**APPLICATION FOR ADDITIONAL GRANT OF GNA TO STUs UNDER  
REGULATION 19**

- 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:** State Transmission Utility (STU)

**8. Details for Additional General Network Access (GNA)**

a. Additional Quantum (MW) of GNA required:

<b>Additional GNA(MW) / Financial Year</b>	<b>Quantum (MW) of GNA from within Region[A]</b>	<b>Quantum (MW) of GNA from outside Region[B]</b>	<b>Quantum (MW) of GNA required [C=A+B]</b>	<b>Start date of GNA</b>	<b>Peak demand (MW)</b>
<b>Year-1</b>					
<b>Year-2</b>					
<b>Year-3</b>					

b. Entity wise segregation of GNA quantum (MW):

<b>Entity Name/ Financial Year</b>	<b>Year 1</b>	<b>Year 2</b>	<b>Year 3</b>
Entity Name-1:			
Entity Name-2:			
Entity Name-3:			
Entity Name-X			
<b>Total</b>			

**9. 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

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!]*