

**B O N N E V I L L E**  
POWER ADMINISTRATION



**Bilateral Transfer Request and Attestation**

By filling in the information below, both the source and recipient utility customer representatives warrant and guarantee: 1) they have the authority to approve and sign this form; 2) they approve the transfer request below; and, 3) neither utility has received or given anything of value for this transfer, pursuant to and save for the exceptions in the Implementation Manual.

Please complete all of the following:

Requested date for BPA to conclude bilateral transfer: \_\_\_\_\_

Amount of bilateral transfer: \$\_\_\_\_\_

Source Utility Customer Name: \_\_\_\_\_

Authorized Representative Name: \_\_\_\_\_

Authorized Representative Signature: \_\_\_\_\_

Date of Signature: \_\_\_\_\_

Recipient Utility Customer Name: \_\_\_\_\_

Authorized Representative Name: \_\_\_\_\_

Authorized Representative Signature: \_\_\_\_\_

Date of Signature: \_\_\_\_\_

For Official Use Only

Date of BPA approval:

Approved by: