

**U.S. DEPARTMENT OF ENERGY
BONNEVILLE POWER ADMINISTRATION**

RESERVATION AGENT TSR SUBMITTAL

This form applies to Customers that have designated BPA Transmission Service as a Reservation Agent (BPAR) to submit a Transmission Service Request (TSR) in OASIS on the Customer's behalf.

Requestor Name & Title:	Company Name:
Address:	
Email:	Phone No:
Service Agreement No:	Reservation Agent Agreement No:
Assigned Transmission Account Executive:	*Date Submitted:
<i>*BPAR will submit a Long-Term Firm Transmission Service Requests (TSR) on OASIS within five (5) Business Days of receipt of all necessary information from the Customer.</i>	

Complete the TSR parameters below for the submittal of a TSR. All TSRs submitted by BPAR will be evaluated per BPA's Tariff and applicable business practices.

TSR PARAMETERS		
Service Type: <input type="checkbox"/> PTP <input type="checkbox"/> *NT	Request Type: <input type="checkbox"/> ORIGINAL <input type="checkbox"/> RENEWAL	
For a RENEWAL submittal, provide parent TSR (Related Ref):		Pre-confirmed: <input type="checkbox"/> Yes <input type="checkbox"/> No
Start Date: 00:00 <input type="checkbox"/> PD / <input type="checkbox"/> PS	Stop Date: 00:00 <input type="checkbox"/> PD / <input type="checkbox"/> PS	
Source/POR:	Sink/POD:	
<input type="checkbox"/> PTP MW:	<input type="checkbox"/> NT fixed MW:	<input type="checkbox"/> NT FCRPS 99,999 MW/Peak Demand:
<input type="checkbox"/> NT TSR to designate a previously forecasted Network Resource		FTSR No:
<input type="checkbox"/> NT Profiled MW:		

**For a NT submittal, a [Designation of a Network Resource](#) form must also be submitted by Close of Business (5pm PPT) as of the date of this TSR submittal.*

Please electronically sign the signature field below and return by email to the Reservation Desk (Res Desk) at tblresdesk@bpa.gov and to their Transmission Account Executive (AE). If opting out of the electronic signature, customer may print, sign, date, and scan the document(s) into a PDF file and return by email to the [Res Desk](#) and to their AE.

Electronic signature

By: _____
Title: _____

If opting out of the electronic signature:

By: _____
Name: _____
(Print/Type)
Title: _____
Date: _____