

APPLICATION FOR WEMS ACCESS

General Information

This form is to be completed by the Applicant that wants to gain access to the Wholesale Electricity Market System (WEMS) to begin the process of becoming a Rule Participant in the Western Australian Wholesale Electricity Market (WEM).

To become a Rule Participant the Applicant must:

- satisfy the requirements set out in clause 2.28.19 of the WA Wholesale Electricity Market Rules (WEM Rules); and
- must fulfil their obligations under the WEM Rules once registered.

Rule Participant registration entitles an entity to access AEMO's electronic Wholesale Electricity Market System (WEMS). A completed Market Participant Administrator (MPA) Nomination Form must also be submitted with this form.

Applicant Details

1. Company or business details

Name of your company or business:

ABN Number:

GST status (circle): Registered / Non-registered

2. Main Contact/MPA (Market Participant Administrator)

The Main Contact will be the person within your organisation which all correspondence will be sent to from AEMO. This person will be the first user granted access to the WEMS and will be the only person able to submit information in WEMS on behalf of your organisation prior to Rule Participant registration. After Rule Participant registration, you may apply to AEMO to add additional WEMS users.

Name:

Position held in company or business:

Postal address:

.....

Phone: Fax:

Email address:

3. Authorised Person

(The person within your organisation who has signing authority for agreements and contracts)

Name:

Position held in company or business:

Postal address:

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Phone: Fax:

Email address:

4. Rule Participant Short Name

A Rule Participant short name must not be longer than eight characters and is used to identify the Rule Participant in the WEMS.

Proposed Rule Participant short name:

Declaration

(To be signed by two Directors of your organisation; or a Director and Company Secretary of your organisation; or if the organisation has only a sole director, by that Director.)

On behalf of (company or business name).....

I declare that the above information constituting this Application is accurate and **I have attached an MPA form.**

(1) Signed: Date:/...../.....

Name:

Position held (circle): Director Company Secretary

Postal address:

.....

Phone: Fax:

Email:

(2) Signed: Date:/...../.....

Name:

Position held (circle): Director Company Secretary

Postal address:

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Phone: Fax:

Email:

AEMO Contact Information

Assistance:

If you need any help to complete this form, please contact Market Operations (WA) by phone on 1300 989 797, or by email to wa.operations@aemo.com.au.

Submission:

This form and any supporting documents are to be submitted to the AEMO at the following address:

Australian Energy Market Operator
Market Operations (WA)
PO Box 7096, Cloisters Square
PERTH WA 6000

Or, send a PDF copy of the completed form by email to wa.operations@aemo.com.au