Request for an BRP contract

In order to be able to conclude an BRP contract, a demand must be submitted to OST. The data below are necessary for generating an BRP contract.

You are kindly invited to inform OST of the language of the official version of your contract by ticking the related box hereunder (EN version of the contract is for information purposes only):

AL

EN

1. ***Details of the company signing the contract***

|  |  |
| --- | --- |
| Company name and legal form |  |
| EIC code[[1]](#footnote-1): |  |
| GLN code[[2]](#footnote-2): |  |
| Applicable law: |  |
| Address of registered office: |  |
| Company no.: |  |
| VAT no.: |  |

# **Details of the persons signing the contract**

|  |  |
| --- | --- |
| Title: | Mr. / Mrs. (delete as appropriate) |
| Signatory 1 (first name and surname): |  |
| Language[[3]](#footnote-3): | Albanian / English (delete as appropriate) |
| Position of signatory 1[[4]](#footnote-4): |  |
| Title: | Mr. / Mrs. (delete as appropriate) |
| Signatory 2 (first name and surname): |  |
| Language²: | Albanian / English (delete as appropriate) |
| Position of signatory 2: |  |

# **Contact details for contractual aspects:**

|  |  |
| --- | --- |
| Contact person 1 for contractual aspects [[5]](#footnote-5) | |
| Title: | Mr. / Mrs. (delete as appropriate) |
| First name and surname: |  |
| Language²: | Albanian / English (delete as appropriate) |
| Address[[6]](#footnote-6): |  |
| Tel.: |  |
| Tel. (mobile): |  |
| E-mail: |  |

|  |  |
| --- | --- |
| Contact person 2 for contractual aspects | |
| Title: | Mr. / Mrs. (delete as appropriate) |
| First name and surname: |  |
| Language²: | Albanian / English (delete as appropriate) |
| Address: |  |
| Tel.: |  |
| Tel. (mobile): |  |
| E-mail: |  |

# **Contact details for nominations:**

1. **Contacts/services who will receive notifications via e-mail regarding nominations and/or must be contacted by phone during working hours:**

|  |  |  |
| --- | --- | --- |
| **First name and surname or**  **name of the service (max. 5)** | **Telephone number(s)/ e-mail address(es)** |  |
|  | Tel.: |  |
| Tel. (mobile): |  |
| E-mail: |  |
|  | Tel.: |  |
| Tel. (mobile): |  |
| E-mail: |  |
|  | Tel.: |  |
| Tel. (mobile): |  |
| E-mail: |  |
|  | Tel.: |  |
| Tel. (mobile): |  |
| E-mail: |  |
|  | Tel.: |  |
| Tel. (mobile): |  |
| E-mail: |  |

1. **Contact details for round-the-clock nominations**

(**available 24 hours a day, and having adequate knowledge of the specifications and conditions governing Nominations**)

|  |  |  |
| --- | --- | --- |
| **First name and surname or**  **name of the service (max. 5)** | **Telephone number(s)/ e-mail address(es)** |  |
|  | Tel.: |  |
| Tel. (mobile): |  |
| E-mail: |  |
|  | Tel.: |  |
| Tel. (mobile): |  |
| E-mail: |  |
|  | Tel.: |  |
| Tel. (mobile): |  |
| E-mail: |  |
|  | Tel.: |  |
| Tel. (mobile): |  |
| E-mail: |  |
|  | Tel.: |  |
| Tel. (mobile): |  |
| E-mail: |  |

# **Contact details for invoices**

# 

|  |  |
| --- | --- |
| Facturation[[7]](#footnote-7) | |
| **Company to be invoiced** | |
| **Company name and legal form** |  |
| **VAT number** |  |
| **Company number** |  |
| **Address of registered office** |  |
| **Details for sending invoices** | |
| Company details | |
| **Company name and legal form** |  |
| **VAT number** |  |
| **Company number** |  |
| **Address of registered office** |  |
| Address to which to send invoices | |
| Address to which to send invoices: |  |
| Contact Person for invoicing | |
| Title: | Mr. / Mrs. (delete as appropriate) |
| First name and surname[[8]](#footnote-8) |  |
| Language²: | Albanian / English (delete as appropriate) |
| Tel.: |  |
| E-mail: |  |

**Remarks:**

1. **If electronic invoicing is requested the ‘Acceptance of Electronic Invoices’ (see point 8) should be completed. In such case, all invoices related to the invoiced entity will be sent electronically.**
2. **All your invoices and contracts can be consulted through OST’s Customer Hub portal; if an access to Customer Hub is required the ‘Request for access to OST Customer Hub’ application form (see point 9) should be completed.**
3. **The validation process of the Access Contract annexes can be done electronically via the Customer Hub portal, for this purpose we need the data included in item 9, espacialy the "Validator" role being filled in. However, electronic validation is only possible if all parties validate electronically**

# **The following elements need to be provided together with this form:**

* Sworn statement according to template provided by OST, accounting for the company’s financial capability and professional conduct.
* Technical capacity (electricity):
* ***a summary of your company's main electricity purchase and sale transactions in the past three years;***
* ***a list of the European TSOs and/or DSOs for which you are already access responsible party (BRP).***

Please note that the BRP contract will only become valid under the condition that prerequisites under the Appendix 2 of the contract concerning the financial guarantee are fulfiled. Please note also that the amount of the guarantee is variable and depends on the position of the BRP under dispositions of Appendix 2.

# **Sworn Statement – standard text**

*(Identification of the company)*

OST SYSTEM OPERATOR

*(name)*

Customer Relations

Date : …………………………

Project : *(name of the service)*

Subject : **Sworn Statement**

I, *(name)*, *(function)*, having the necessary powers to represent hereby (name of the company) swear on my honor that:

* (*name of the company)* is not in a state of bankruptcy or of settlement, has not ceased its economic activity or has not obtained a judiciary arrangement, nor is in similar situation as a consequence of a similar procedure existing in the national laws and/ or regulations of the country of establishment *(name of the country);*
* *(name of the company)* has not filed for bankruptcy, nor is a procedure of settlement pending, nor is the company subject to a similar procedure existing in the national laws and/ or regulations of the country of establishment *(name of the country)*;
* *(name of the company)* has not been convicted of an offence concerning professional conduct by a judgement which has the force of res judicata;
* *(name of the company)* has not been guilty of grave professional misconduct proved by any means which the contracting authority can justify ;
* *(name of the company)* has fulfilled its obligations relating to the payment of social security contribution in accordance with the laws of the country of establishment or in accordance with the laws of the country of the contracting authority ;
* *(name of the company)*has fulfilled their obligations relating to the payment of taxes in accordance with the laws of the country of establishment or in accordance with the laws of the country of the contracting authority;
* *(name of the company)* is not guilty of serious misrepresentation in supplying the information required in this document;
* *(name of the company)* holds all necessary insurances necessary to perform the service concerned*.*

*(name of the company)*

*(date)*

signature *(name)(address)( function )*

# **Acceptance of electronic invoices from OST.**

Electronic invoicing is only effective after signing this application e-invoicing form which lists the conditions for e-invoicing.

|  |  |
| --- | --- |
| **Company** |  |
| **VAT number** |  |
| **OST customer number**[[9]](#footnote-9) |  |
| **E-mail address for e-invoicing** |  |
| **Represented by** |  |

Hereby confirms that it agrees to receive electronic invoices under the following conditions:

* One e-mail shall be sent to the e-mail address provided above, containing the invoice in PDF format including an xml format.
* The invoice shall contain an electronic signature.
* The subject line of the e-mail shall include "OST Group invoice 32xxxxxxxx of xx/xx/xxxx".
* The PDF's name shall include "PDF invoice 32xxxxxxxx".
* The original PDF shall be sent from [noreply\_invoice\_ar@OST.be](mailto:noreply_invoice_ar@elia.be).
* No annexes shall be sent with the invoice; however, the annexes shall be available from our Customer Hub.
* If the provided e-mail address no longer appears to work, OST shall get in touch with the contact person named above. If we are not provided with a new e-mail address within three days, the invoice shall be sent by post.
* This agreement shall run for an indefinite period.
* Either party may terminate this agreement by registered letter.
* Any such termination shall take effect on the first day of the following month, counted as 30 days after the date of dispatch of the registered letter. Termination does not alter the parties' respective obligations with regard to administration.

This agreement applies to all valid connections, access points, BRPs, metering equipment or any other agreement in respect of which OST issues invoices to the company mentioned above. The company authorises OST to amend the relevant annexes of these contracts (i.e. the parts where e-invoicing is mentioned) on the basis of the information provided above.

Signature Date

# **Declaration of netting of obligations**

OST SYSTEM OPERATOR

*(name)*

Customer Relations

Date : …………………………

Project : *(name of the service)*

Subject : **Declaration of netting**

I, *(name)*, *(function)*, having the necessary powers to represent hereby (name of the company) declare that I agree on the reconciliation of mutual debts with OST SYSTEM OPERATOR and that the net position will be calculated by subtracting the smaller debt from the larger for each netting period

Signature Date

# **Request for access to OST Customer Hub (one page per person)**

|  |  |
| --- | --- |
| **Company Name**: |  |
| **Company CCN** (Company Contract Number):  This is the unique identification code of your company within OST.  It consists of the 3rd until 5th character of your contract(s). Please contact the contractual aspects contact of your company if you don't know the references of the contracts your company currently holds  E.g. Contract reference  B-456-15 => CCN = 456  U-456-15-01 => CCN = 456  C-456-001 => CCN = 456 |  |
| **Validation Role:**  Please specify for which contract type or market role the user should have the validation role.  ACH = Access Contract  BRP = Access Responsible Party Contract  GU = Connection Contract |  |
| **Standard Access:**  Please specify for which contract type the user should have a standard access. (not applicable for supplier)  BSP = Balancing Service Provider Contract  BRP = Balance Responsible Party Contract  GU = Connection Contract |  |
| **Preferred correspondence language:**  Albanian / English |  |
| Mr.  Mrs. |  |
| First Name |  |
| Last Name |  |
| Function |  |
| Phone |  |
| Mobile (optional) |  |
| **Single Key User E-mail:**  Please specify only the e-mail of the single key user of the requested userid. The confirmation of creation of the userid and any further communications about the userid (e.g. reminder mail for expiration, mail with link in case of forgotten password) will be sent to this e-mail address. |  |

1. An EIC code is required to be able to nominate as BRP. In case the requesting entity does not yet have an EIC code, the current request for BRP-contract has to be introduced to OST together with a request for an EIC Code (webform available on OST’s website). Also, if the requesting party already holds an international EIC code registered in a neighbouring country and declared to Entso-e it may also use it for his nominations in Belgium. [↑](#footnote-ref-1)
2. The GLN code (Global Location Number) is only required in case of distribution nominations. For these, please indicate a single GLN code, which must be the same as the one by which the company is known by distribution system operators. [↑](#footnote-ref-2)
3. Preferred language for individual communication [↑](#footnote-ref-3)
4. One signatory is sufficient for OST, a second signatory is optional [↑](#footnote-ref-4)
5. The landline phone number and e-mail address of the first contact person will be indicated in the list of BRPs on the OST website [↑](#footnote-ref-5)
6. If the address is not indicated, OST will assume that the personal address is the same as the address of the registered office [↑](#footnote-ref-6)
7. The details in the grey cells below will be included in the invoice, while the other details are needed to properly manage the companies in our databases. [↑](#footnote-ref-7)
8. The name of the contact person will also be included in the invoice, but not in the address to which to send invoices [↑](#footnote-ref-8)
9. This is the unique identification code of your company within OST. It consists of the 3rd until 5th character of your contract(s). Please contact the contractual aspects contact of your company if you don't know the references of the contracts your company currently holds [↑](#footnote-ref-9)