

North Carolina Transmission Planning Collaborative Form to Request Evaluation of an Enhanced Access Option

Date of Submittal	
Submitting Company (TAG participant)	
Company Contact	
Contact Phone Number	
Contact E-Mail Address	
Sink 1. Specify the sink control area. 2. Specify LSE, if applicable.	
Source 1. Specify the source control area. 2. Specify if the transaction is a system purchase or purchase from a specific generator(s). If from a specific generator(s), provide location of the generator for proper modeling. Attach interconnection one-line diagram as necessary.	
Point-of-Receipt/Point-of Delivery Path: (Examples: AEP/DEC – DEC/DEP; SCEG/DEP; SOCO/DEC)	
Maximum Capacity in MW Summer Winter	
Start date	
End date, if applicable	
Purpose and benefit for this study request.	

Attach additional information as necessary.