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| IESO logo | **Ontario Reliability Compliance Program**  **Requirements Form**  **EMERGENCY RESTORATION PLANNING** |

**NOTICE TO MARKET PARTICIPANTS:** The *market rules* require *market participants* to provide to the IESO such data as may be required and within the time prescribed by the *IESO* for reliability purposes and to enable the *IESO* to satisfy a request by a *standards authority* (ref Chapter 5, sections 14.1.2 and 14.1.4). The *IESO* has developed the Ontario Reliability Compliance Program (ORCP) to assist *market participants* in meeting these obligations. As part of the ORCP, *market participants* are required to submit to the *IESO* electronic certification forms using the *IESO* Reliability Compliance Tool accessed via the *IESO* Web Portal.

This requirements form **does not** replace the electronic certification forms. Rather, it is primarily intended for use by the *IESO* when the Reliability Compliance Tool becomes unavailable for use.

Terms and acronyms used in this Form that are italicized have the meanings ascribed thereto in Chapter 11 of the “*Market Rules*”.

| Part 1 – General Information |
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| **Market Participant Information:** |
| **Market Participant Name:** |
| **Market Participant ID:** |
| Compliance Information: **Compliance Year:** |
| Reporting Period: **From:**   **To:** |

## Part 2 – Market Participant Compliance Reporting

As an authorized representative of the *market participant*, I certify that the *market participant* was:

## Part 1 – Market Participant Compliance Reporting

**COMPLIANT** with the requirements of IESO-FORM-1609 stated below for the entire Reporting Period.

Did the review of your *restoration participant attachment* during the compliance reporting Period require any changes to be made? **Please respond either ‘Yes’ or ‘No’ and include your comments, if any.**

Please enter the last *restoration participant attachment* review date completed during the Reporting Period.

| Comments: |
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**NON-COMPLIANT** for a portion of or the entire Reporting Period with some or all requirement(s) of IESO-FORM-1609, but in compliance with all other applicable requirements of IESO-FORM-1609 for the entire Reporting Period, as indicated below.

**R1:** All *restoration participants* must submit a *restoration participant attachment* to the *IESO* and must contain the following information:

**1.1:** Facilities:

**1.1.1:** All *facilities* covered by the attachment are identified.

**1.1.2:** All directly-*connected facilities*, including control centres, that are pre-wired to accept backup/portable generation and loads that can be supplied from this source are identified.

**1.1.3:** All *facilities* with permanently installed emergency power generators and loads that can be supplied from this source are identified.

**1.2:** Any known condition that would prevent or restrict a *facility* from performing in accordance with the OPSRP must be identified.

**1.3:** *Restoration participants* with key facilities must meet the testing requirements described in the Testing section[[1]](#footnote-1) and must verify that they:

**1.3.1:** Have a critical component testing program.

**1.3.2:** Have tested all their critical components in accordance with *NPCC* criteria.

**1.3.3:** Maintain test records.

**1.4:** *Restoration participants* with supplemental *generation units* that support key facilities must verify that they:

**1.4.1:** Are able to place these *generation units* in service for their intended purpose, consistent with restoration plan priorities.

**1.4.2:** Have pre-arranged provisions to replenish fuel.

**1.5:** *Restoration participants* that operate *unattended facilities* on a restoration path must verify they have the capability to send staff to perform switching or troubleshoot problems that affect restoration.

**1.6:** *Restoration participants* must verify that they:

**1.6.1:** Deliver a training program to operators, which includes their restoration obligations and expected actions, and is based on the equipment and tools that they operate.

**1.6.2:** Provide two hours of restoration-related training every two calendar years to their field switching personnel that perform unique restoration-related tasks that are outside their normal tasks.

**1.6.3:** Have shown due diligence in preparing their operators to fulfill their restoration obligations by ensuring they have attended restoration training within the last three years.

**1.6.4:** Maintain operator training records.

**1.6.5:** *Restoration participants* that operate *certified black start facilities* must verify that they provide two hours of restoration-related training every two calendar years to any operating personnel responsible for performing startup of black start *generation units* and energization of the associated initial bus/circuit on the restoration path.

**1.7:** *Restoration participants* that use agents to fulfill any restoration-related operating obligations remain responsible for fulfilling those obligations, including training of the agents. In addition, the *restoration participant* must:

**1.7.1:** Identify that agents are used and the *facilities* they operate.

**1.7.2:** Identify the agreements that govern the use of their operating agents.

**1.8:** *Restoration participants* must provide the following contact information for their Restoration Plan Planning Coordinator:

**1.8.1:** Name and/or position.

**1.8.2:** Phone number and email or mail address.

**1.9:** *Restoration participants* must also ensure that their real-time *facility* location operator contact information is up-to-date.

**R2:** Each *restoration participant* shall review its *restoration participant attachment* at least annually, or as required, and shall, following such review, submit to the *IESO*:

**2.1:** a statement certified by an officer or equivalent of the *restoration participant* confirming that the review has not required any change to be made to its *restoration participant attachment*; or

**2.2:** a revised version of its *restoration participant attachment*, amended as may be required by the results of the review, together with a statement certified by an officer or equivalent of the *restoration participant* identifying such amendments, as the case may be**.**

**NOTE:** Submit the revised emergency preparedness plan thru [Online IESO Portal](https://online.ieso.ca).

**NOTE2:** Some parts of R1 may not be applicable to all restoration participants.

| Comments: |
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## Reference Document(s)

[Market Manual 7.8 – Ontario Power System Restoration Plan (OPSRP)](http://www.ieso.ca/imoweb/pubs/systemOps/so_OntPowerSysRestorePlan.pdf)

[Market Rules Chapter 5 - Power System Reliability](http://www.ieso.ca/imoweb/pubs/marketRules/mr_chapter5.pdf), Section 11.3

## Signature

| I have full authority to bind the *market participant*. I certify that all information set out or referred to in this form is true, accurate and complete as at the date of this certification. I further understand that this information is provided in accordance with the requirements of Chapter 5, Section 14.1.1 of the *market rules*.  I understand that this information is subject to verification by the *IESO* and that such a review or audit will require all information set out or referred to in this form be verified by appropriate documentation.  **Certified by MPCC[[2]](#footnote-2):**    **Please Print Name**    **Signature**  **Date of Certification:** |
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1. Reference to Testing section in Market Manual 7.8: Ontario Power System Restoration Plan. [↑](#footnote-ref-1)
2. market participant compliance contact [↑](#footnote-ref-2)