# Relinquishing SC Letter Instructions:

* To submit documentation, please review <http://www.caiso.com/Documents/How-to-Submit-Documentation-for-Applications-and-Ongoing-Obligations.pdf> for proper steps

# Resource transfers – Effective date at least 11 business days from submittal date.

# Review the master file full network model dates to verify effective dates do not fall in the week where changes cannot be made. If your effective date falls during a ‘blackout time’ you will need to resubmit. <http://www.caiso.com/market/Pages/NetworkandResourceModeling/Default.aspx>

# Remove this text box when copying to resource owner letterhead

* Submitted by either accepting or relinquishing SC

**Click or tap to enter a date.**

California Independent System Operator

Attn: SC Requests

250 Outcropping Way

Folsom, CA 95630

Dear CAISO:

In accordance with the Scheduling Coordinator Application Protocol (SCAP) - Appendix B, this notification serves to inform the California Independent System Operator (CAISO) that the Scheduling Coordinator (SC) identified below will relinquish responsibility for scheduling the below listed Resource(s). Also, we have indicated which programs this resource is currently participating in by checking the respective box(es).

1. **Is this a Resource Transfer?** Yes  No

If yes then submit a signed relinquishing SC letter, a signed new SC letter and a signed resource owner letter via CIDI ticket.

If no, enter reason for SCID and resource association:      

1. **Is this a Dynamic Resource?** Yes  No

If Yes: is this resource being added to a DSA? Yes  No  DSA Executed Date:

1. **Is this a SC Metered Resource?** Yes  No

If Yes:  I acknowledge I have updated the MSASC Schedule 1 as applicable with CAISO Regulatory Contracts to include any meter data.

If No: Email [regulatorycontracts@caiso.com](mailto:regulatorycontracts@caiso.com) and ask for the MSASC schedule 1 to update. CAISO cannot proceed at this time until the schedule 1 has been updated.

N/A  Resource is ISOME

We have also indicated the programs this/these resources are currently participating in by checking the appropriate box(es) below.

* Resource Owner:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Resource ID** | **WEIM Participating Res**o**urce**  **(***Note 1****)*** | **WEIM Non-Participating Resource**  **(***Note 1****)*** | **Hybrid /**  **Co- located Res**o**urce** | **Multi-Stage Generator** | **Use Limited Plan** |
| ***(add more rows as needed)*** |  |  |  |  |  |

*Note 1* WEIM Entity:

**Relinquishing Schedule Coordinator information:**

* Ending Date: **Click or tap to enter a date.** Time: 23:59:59
* SC Name:
* SCID:
* BSCID:

This letter certifies that the information is true and accurate for the above referenced resources.

Please inform me if you have any questions.

***Signature:***

***Title:***

***Phone:***

***Email:***