

## Form GEN01 - Generator Outage Request

Sections 1, 2, 3 and 4 must be completed for the Generator Outage request to be processed.

Section 1 Outage Request Type							
New Outage		Outage Change	Ne	w STMO		STMO Change	
	7.		,			^	
Section 2 Unit Description							
Company S	Station	Unit ID					
Section 3 Outage	Docorinti	ion.					
	ible* Preferred timing	n**	Outage Reason				
Daradon	- Chavana	Tolerica umm	9	Catago Reason			
*MW Unavailable must be a	·	**If specific times/dates are required, please complete Section 5					
Section 4 Contact Details of Requesting Party							
Name E	-mail	Phone	Phone Alternative Point of Contact				
Section 5 Specific Times (if Required)							
Start Time E	nd Tme	MW Unavailable		Outage Reason			
			0d 0hrs				
			0d 0hrs				
Section 6 Outage	Pre-Cond	dition &Testing during	ng/ after the	Outgae			
Section 6 Outage Pre-Condition &Testing during/ after the Outgae  If the work to be carried out before/during/after the outage requires special conditions (eg a warm start), then these conditions must be							
clearly outlined here. If there is a requirement for on-load testing during the outage, then this must also be stated here.							
Please e-mail the compl	eted form to:	psop@eirgrid.com					

Note: Confirmation of receipt of the request will be received within 24hours of submitting a request, during normal business hours. Incomplete Generator Outage request forms cannot be processed. If you do not receive a reply within this time, please contact us by phone at 01-2370352