

Counterparty Confirmation

We _____ (Name of Counterparty)

confirm the supply relationship

with _____ (Name of Auction Participant)

with the EIC-Number _____ (EIC-Number of Auction Participant)

Counterparty EIC Code

Balance Group Contract	<input type="checkbox"/>	YES, the relevant EIC-Code is:	
Contratto di dispacciamento	<input type="checkbox"/>	YES, the relevant EIC-Code is:	

Counterparty Contact Data

Last name, first name	
Phone number	
E-Mail address	

Delivery of Counterparty Confirmation Form

Note: Swissgrid will not accept any handwritten change.

Please follow the following procedure:

1. Send the **saved PDF form** to bg-registration@swissgrid.ch (no signature required).
2. Send the **duly signed form** by e-mail to bg-registration@swissgrid.ch.
3. The original shall be sent to:

Swissgrid AG
 Capacity Allocation & Scheduling
 Bleichemattstrasse 31
 Postfach
 5001 Aarau
 Switzerland

Signature of Counterparty:

 Date, Place

 Name, First Name, Function

 Signature of Counterparty