**To: SONI Ltd. Castlereagh House Control Centre**

**OUTAGE NOTICE**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **1.** request from SONI Ltd the following outage | | | | | | | | | | | | | | |
| Generator | | Outage Type | AVAIL prior to Outage  MW | Revised AVAIL  MW | | Valid From | | | | | Valid To | | | |
|  | |  |  |  | | Date | | Time | | | Date | | Time | |
|  | |  |  | **0** | |  | |  | | |  | |  | |
| Note: If availability on return from outage is different from that on release, this should be advised on a separate availability notice. | | | | | | | | | | | | | | |
| REASONS FOR OUTAGE REQUEST | | | | | | | | | | | | | | |
| **Include details of outage here - add times here if not enough space available above, or use additional sheets** | | | | | | | | | | | | | | |
| **Is power removed from metering at any time during the above outage?** | | | | | | | **If yes, please provide date and time below:** | | | | | | | |
| **Yes  No** | | | | | | | Date | | | Time | | Duration | | |
|  | | | | | | |  | | |  | |  | | |
|  | | | | | | |  | | |  | | | | |
| **This notice confirms telephone notice issued at** | | | | | | |  | | | **(insert time if applicable)** | | | | |
| **If this notice contradicts the information given in the telephone notice it shall be disregarded and SONI shall so inform the Generator.** | | | | | | | | | | | | | | |
| **Name:** |  | | | | **Date/Time of issue:** | | | |  | | | | |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Position:** |  | **Signature:** |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **2. SONI RESPONSE TO REQUEST (Fill as appropriate)** | | | | | | | |
|  | | | | | | | |
| **1. Request accepted and confirmed as above** | | | | | | |  |
| **2. Request refused** | | | | | | |  |
| **3. Alternative timing proposed (STPMO, NUO or PO) as shown below:** | | | | | | |  |
| **Outage start date:** | | dd/mm/yy | | **Outage Start Time** | | hh:mm | |
| **4. SONI requests the outage to be considered as one in which the CDGU is on 24hr recall.** | | | | | | |  |
|  | | | | | | | |
| **Name:** |  | | **Date/Time of issue** | |  | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Position:** |  | **Signature** |  |

On completion please email to [Generation-Outages@soni.ltd.uk](mailto:Generation-Outages@soni.ltd.uk)