# Custom Load Aggregation Point (CLAP)/EDAM Load Aggrigation Point (ELAP) selection:

* This is used for adding CLAP/ELAP to new or existing SCIDs. It also used to end date (remove) the LAP from specific SCIDs. This is used specifically for load.
* To submit documentation, please review <http://www.caiso.com/Documents/How-to-Submit-Documentation-for-Applications-and-Ongoing-Obligations.pdf> for proper steps
* **IMPORTANT:** New load needs to submit a settlement quality meter data (SQMD) template for approval prior to the CLAP/ELAP effective date / initial load scheduling date. The SQMD process can take 40 days. Please click here for information on the SQMD: [5750 Settlment Qaulity Meter Data (SQMD) Plan – Submission and Approval Process](http://www.caiso.com/Documents/5750.pdf)

# Letter templates must be printed on applicable letterhead, signed, scan as a pdf.

# CLAP/ELAP Changes effective date should be at least 11 business days from date on letter.

# More than 30 days early submissions will not be processed. All submission must adhere to Master File Data Freeze notifications. – Remove this text box when copying to letterhead

***[Current Date]***

California Independent System Operator

Attn: Customer Services and Industry Affairs

250 Outcropping Way

Folsom, CA 95630

**Regarding: Load Aggrigation Point Selection**

Dear CAISO:

As a Scheduling Coordinator representing one or more Load Serving Entities, this notification serves to inform the California Independent System Operator (CAISO) of its Custom Load Aggregation Point (CLAP)/EDAM Load Aggrigation Point (ELAP) selection for the SCIDs indicated below:

Schedule Coordinator information:

* Meter Service Agreement for Scheduling Coordinators (MSA/SC) Effective Date: ***[mm/dd/yyyy]***
* SC Name: ***[enter*** ***Scheduling Coordinator Legal Name]***

Sample naming convention for Load Resorce IDs will be C/ELAP\_SCID\_[Resource]\_Load (update yellow highlights)

[ ]  **NEW LOAD:** Project Number :       SQMD Accepted Date:

[ ] **CLAP** [ ] **ELAP**

**Load Resource ID:**       (add more lines as required)

Effective Date:
SCID:
EDAM Entity:
[ ]  **End Date Current** [ ] **CLAP** [ ] **ELAP**

**Load Resource ID:**       (add more lines as required)

Effective Date:
SCID:
EDAM Entity:

Please inform me if you have any questions.

***[Signature required with contact information]***