

**Rate Schedule 5. Appendix ~~IIII~~
Restoration Services Certification Form**

[Name of Generator] hereby certifies that the [name/location of unit] performed a Black Start Capability Test on [date] in accordance with the ISO Procedures and [successfully completed/did not complete] this test in accordance with the test protocols set forth in Appendix ~~IIII~~ of Rate Schedule 5 of the ISO Services Tariff.

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[Name of Generator] further certifies that it has identified a list of critical components in its units providing Restoration Services (e.g., batteries, diesel back-up generators, inverters etc.), maintains such critical components, and has performed tests to verify the condition of these critical components in accordance with good utility practice.

Signature of Officer