

Company name  
Address  
Fax:  
Email:



Plinovodi d.o.o.  
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**ACTIVATION REQUEST SHOULD BE SENT TO THE LISTED E-MAIL ADDRESS AOR FAX!**

**Request for activation of transmission capacity for exit point inside Republic of Slovenia**

Request date	
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**Information from Framework Agreement**

Company name	
Framework Agreement No.	
Entry into force of Framework Agreement	
Expiration of Framework Agreement	
Exit point code	
Maximum amount of transmission capacity for activation [kWh/day]	

**Information on Activation Request according to Framework Agreement**

Requested transmission capacity for activation [kWh/day]	
Activation start	<b>NEXT DAY AFTER THE REQUEST DAY</b>
Activation finish	

**Approval of compliance with contractual obligations**

Activation request compliance with agreements of network user	YES	NO
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NAME AND SURNAME

Confirmed by Commercial and regulation  
department

**Approval of activation by Transmission System Operator**

Approved transmission capacity for activation [kWh/day]	
Approved activation start	
Approved activation finish	

NAME AND SURNAME

Signature from authorized person by network user

NAME AND SURNAME

Signature from authorized person  
by transmission system operator