**Digital Certificate Audit Attestation**

Pursuant to ERCOT Protocol §16.11, Market Participants must verify compliance with the Digital Certificate use requirements set forth in the ERCOT Protocols. You must complete this form and return it via (i) email to [mpappl@ercot.com](mailto:mpappl@ercot.com) (.pdf version); (ii) facsimile to (512) 225-7079; or (iii) regular mail to: ERCOT, Market Participant Registration, 7620 Metro Center Drive, Austin, Texas 78744. This audit and attestation shall be completed for *each* Market Participant Type for which the Market Participant is registered in the ERCOT Region. **This document must be signed by an officer of your company (if a corporation) or another individual authorized to bind the Market Participant.** Please email [mpappl@ercot.com](mailto:mpappl@ercot.com) if you are unsure who is authorized to bind your company.

**Part A: Company Information**

|  |  |
| --- | --- |
| **Legal Name of the Market Participant (MP):** |  |
| **Market Participant Type:** | **CP  CRRAH**  **LSE**  **QSE  Sub-QSE**  **Resource**  **TSP and/or DSP** |
| **DUNS Number:** |  |
| **Name of Primary User Security Administrator (USA):** |  |

**Part B: Attestation**

MP hereby affirms the following:

(1) MP has reviewed the list of Digital Certificate holders, for the MP Type indicated above, generated through the Market Participant Identity Management (MPIM) application within the Texas Market Link (TML) website (the List), on **Insert Date** and, if MP has any corrections to this list, MP has provided corrections to ERCOT.

(2) MP and each USA and Digital Certificate holder identified on the List meet the applicable requirements of Protocols Section 16.11.1(1) and (2).

(3) Each USA and Digital Certificate holder identified on the List is currently employed by or is an authorized agent of MP.

(4) The USA identified on the List is authorized to be the USA for MP.

(5) Each Digital Certificate holder identified on the List is authorized to retain and use the Digital Certificate.

(6) Each Digital Certificate holder identified on the List needs the Digital Certificate to perform his or her job functions.

(7) MP has requested revocation of Digital Certificates when required by Protocols Section 16.11.1(2).

(8) MP has complied with the audit requirements of Protocols Section 16.11.3.

(9) Exceptions to the above, if any:

I affirm that I have personal knowledge of the facts stated in this Attestation and have the authority to submit this Attestation on behalf of the Market Participant listed above.

**Officer/Executive:**

**Name and Title:**

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:**