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**NIGERIAN ELECTRICITY REGULATORY COMMISSION'S
REPORTING COMPLIANCE REGULATIONS, 2012**

REPORTING COMPLIANCE REGULATIONS, 2012



ARRANGEMENT OF REGULATIONS

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General Reporting Requirements—for All Licensees.

S. I. 40 of 2012

ELECTRIC POWER SECTOR REFORM ACT
(No. 6 of 2005)

REPORTING COMPLIANCE REGULATIONS, 2012

[26th Day of July, 2012]

Commence-
ment.

In exercise of the powers conferred on it by section 96 (1) and (2) (f) of the Electric Power Sector Reform Act, No. 6 of 2005, and all other powers enabling it in that behalf, the NIGERIAN ELECTRICITY REGULATORY COMMISSION makes the following regulations for reporting compliance by Licensees—

CHAPTER I—REPORTING COMPLIANCE AND FORMAT

1. Every licensee shall forward a report of any change in its Memorandum and Articles of Association to the Commission as stipulated in the First Schedule to these Regulations.

Change in
Memorandum
and Articles
of
Association.

2. Engineering Standards and Safety Reporting Requirements or Formats Licensees shall submit reports to the Commission as follows—

Engineering
Standards
and Safety
Reporting
Requirements
or Formats

(a) Each licensee shall submit full incident and accident report in accordance with the Second Schedule to these Regulations ;

(b) Generation licensee shall submit the required data for computation of Key Performance Indicators in accordance with the Third Schedule to these Regulations ;

(c) Transmission licensee shall submit the required data for computation of Key Performance Indicators in accordance with the Fourth Schedule to these Regulations ;

(d) Transmission licensee shall submit the required data for Reporting on Conditions of Transformers in accordance with the Fifth Schedule to these Regulations ;

(e) Transmission licensee shall submit the required data for Reporting on Conditions of Circuit Breakers in accordance with the Sixth Schedule to these Regulations ;

(f) Transmission licensee shall submit the required data for Reporting on Conditions of Reactors in accordance with the Seventh Schedule to these Regulations ;

(g) Transmission licensee shall submit the required data for Reporting on Conditions of Ground Switch in accordance with the Eight Schedule to these Regulations ;

(h) Transmission licensee shall submit the required data for Reporting on Conditions of 132kV Transmission Lines in accordance with the Ninth Schedule to these Regulations ;

(i) Transmission licensee shall submit the required data for Reporting on Conditions of 330kV Transmission Lines in accordance with the Tenth Schedule to these Regulations ;

(j) Transmission licensee shall submit the required data for Reporting on Conditions of Isolators in accordance with the Eleventh Schedule to these Regulations ;

(k) Transmission licensee shall submit the required data for Reporting on Conditions of Communication/SCADA in accordance with the Twelfth Schedule to these Regulations ;

(l) Distribution licensee shall submit the required data for computation of Key Performance Indicators in accordance with the Thirteenth Schedule to these Regulations ;

(m) Distribution licensee shall submit a six-monthly report on Derogation Requests and Approved Derogations in accordance with the Fourteenth and Fifteenth Schedules to these Regulations, respectively ;

(n) Distribution licensee shall submit the required information on approved Distribution Code derogations in accordance with the Sixteenth Schedule to these Regulations ;

(o) Distribution licensee shall maintain and update its Distribution Load Shedding Plan in accordance with the Seventeenth Schedule to these Regulations ;

(p) Distribution licensee shall submit a Five-year Demand Forecast and a Five-year Distribution Plan in accordance with the Eighteenth and Nineteenth Schedules to these Regulations respectively ;

(q) Each licensee shall adhere strictly to the Safety Orientation Training requirements in accordance with the Twentieth and Twenty-first Schedules to these Regulations respectively ;

(r) Each licensee shall keep the required data on accident in accordance with the Twenty-second and Forty-fourth Schedules to these Regulations ;

(s) Each licensee shall provide the information required in accordance with the Twenty-third Schedule to these Regulations ; and

(t) Each licensee shall provide the Health and Safety Manual Information required in accordance with the Twenty-fourth, Twenty-fifth, Twenty-sixth, Twenty-seventh and Forty-fifth Schedules to these Regulations, respectively.

3. The Market Operators and every licensee shall submit reports to the Commission as follows—

(a) The Market Operator shall submit a forecast report in accordance with the Twenty-eight, Twenty-ninth and Fortieth Schedules to these Regulations, respectively ;

(b) Generation licensee shall submit forecast expenditure report in accordance with the Thirtieth and Thirty-first Schedules to these Regulations, respectively ;

(c) Distribution licensee shall submit actual expenditure report in accordance with the Thirty-second and Thirty-third Schedules to these Regulations, respectively;

(d) The Market Operator shall submit a monthly Disbursement Summary in accordance with the Thirty-fourth Schedule to these Regulations ;

(e) Generation licensee shall submit a monthly Market Settlement Statement in accordance with the Thirty-first Schedule to these Regulations ;

(f) Distribution licensee shall submit a monthly Market Settlement Statement in accordance with the Thirty-fifth Schedule to these Regulations ;

(g) Trading licensee shall submit a monthly Reporting document for Trading in accordance with the Thirty-sixth Schedule to these Regulations ;

(h) Trading licensee shall submit an Annual Reporting document for Trading in accordance with the Thirty-seventh Schedule to these Regulations.

(i) Transmission licensee shall submit Transmission Forecast Expenditure in accordance with the Forty-first Schedule to these Regulations ;

(j) Transmission licensee shall submit Annual Actual Expenditure in accordance with the Forty-second Schedule to these Regulations ;

(k) Transmission licensee shall submit monthly Settlement Statement in accordance with the Forty-third Schedule to these Regulations.

4. Distribution licensee shall submit the following to the Commission—

Customer
Related
Matters.

(a) Monthly customer complaints report in accordance with the Thirty-eighth Schedule to these Regulations ; and

(b) Monthly customer complaints register in accordance with the Thirty-ninth Schedule to these Regulations.

CHAPTER II—OTHER REPORTING OBLIGATIONS

5.—(1) A generation licensee shall notify the Commission as soon as practicable, where there is a breach or likelihood of it breach of any provision of the Commission codes, standards or regulations.

Generation
Licensee.

(2) A generation licensee shall promptly provide the Commission with details of any significant change that materially affects the licensee's ability to meet its material obligation.

(3) A generation licensee shall submit annual reports in respect of its licensed business, including financial, technical and administrative aspects.

(4) For each financial year, a generation licensee is required to prepare its accounts in accordance with formats approved by the Commission for the generation business.

(5) There shall be separate accounts for every other business operated by the licensee as required under the Companies and Allied Matters Act as if such business were carried on by different companies.

(6) A generation licensee shall provide an auditor's report along with the financial statement, which shall state that the contents of the financial statement represent a true picture of the facts.

(7) The financial statement shall commence from the date of the licence to the last day of the Licensee's accounting period and subsequent financial years shall run from the day immediately following the last day of the preceding accounting period up to the last day of the accounting period.

(8) A generation licensee shall obtain the Commission's consent to dispose any of its relevant assets worth ₦5 Million Naira and above.

(9) A generation licensee shall develop a policy with respect to the manner by which it intends to comply with its duties and obligations under applicable environmental laws in force in Nigeria.

Transmission
Licensee.

6.—(1) A transmission licensee shall notify the Commission as soon as practicable when there is a breach or likelihood of a breach of any provision of the Commission's codes, standards or regulations.

(2) A transmission licensee shall promptly provide the Commission details of any significant change that materially affects the licensee's ability to meet its material obligation.

(3) A transmission licensee shall submit annual report in respect of its licensed business, including financial, technical and administrative aspects in a format approved by the Commission.

(4) For each financial year, a transmission licensee is required to prepare its accounts in accordance with formats approved by the Commission for the transmission business and there shall be separate accounts for every other business operated by the licensee as required under the Companies and Allied Matters Act, as if such business were carried on by different Companies.

(5) A transmission licensee shall provide an auditor's report along with the financial statement which shall state that the contents of the financial statement represent a true picture of the facts.

(6) The financial statement shall commence from the date of issue of the license to the last day of the Licensee's accounting period and subsequent financial years shall run from the day immediately following the last day of the preceding accounting period up to the last day of the accounting period.

(7) A transmission licensee shall obtain the Commission's consent to dispose of any of its relevant assets worth ₦5 Million Naira and above.

(8) A transmission licensee shall notify the Commission within three months of receiving or refusing an application for connection and Transmission licensee shall not unreasonably refuse to connect an applicant.

(9) For each financial year, a transmission licensee shall submit to the Commission its transmission revenue requirement data together with its transmission system investment plan for the ensuing years.

(10) The licensee shall obtain the Commission's written approval for major investments in accordance with the procedure approved by the Commission and

all subsequent variations or addition to the approved investment plan shall require the approval of the Commission.

(11) As soon as practicable after being licensed, and in any event not later than the date the Commission shall specify, the transmission licensee shall prepare a statement approved by the Commission, setting out the charges for the use of the transmission system, the charges for connection to the transmission system, and a schedule for transmission connection charges and transmission use of system or wheeling charges.

(12) Each year, the transmission licensee shall submit, for the Commission's approval, a transmission master plan with expansion and upgrade investments for the next three years.

(13) The transmission licensee shall provide to the Commission, information concerning the central dispatch and merit order system, or any aspect of system operation.

(14) Before the beginning of each year, the transmission licensee shall submit to the Commission for approval, its planned system operation budget along with relevant data for the ensuing financial year.

(15) The transmission licensee shall provide to the Commission such information as the Commission may request concerning the settlement and payment system or other aspects of its market operation.

(16) Before the beginning of each financial year, the transmission licensee shall submit to the Commission, for its approval, its planned market operation budget, along with relevant data for the ensuing financial year.

(17) The transmission licensee shall send outcome of review, written representations objections, and proposed revisions to the Market Rules to the Commission for approval.

(18) A transmission licensee shall develop a policy with respect to the manner by which it intends to comply with its duties and obligations under applicable environmental laws in force in Nigeria.

7.—(1) A distribution licensee shall notify the Commission as soon as it becomes aware of the breach of any of the Commission's codes, standards or regulations.

Distribution
Licensee

(2) A distribution licensee shall promptly provide to the Commission details of any significant change that materially affects the licensee's ability to meet its material obligation.

(3) A distribution licensee shall submit annual reports in respect of its licensed business, including financial, technical and administrative aspects.

(4) For each financial year, a distribution licensee is required to prepare its accounts in accordance with formats approved by the Commission for the distribution business and there shall be separate accounts for every other business

operated by the licensee as required under the Companies and Allied Matters Act, as if such business were carried on by different companies.

(5) A distribution licensee shall provide an auditor's report along with the financial statement, which shall state that the contents of the financial statement represent a true picture of the facts and the financial statement shall commence from the date of the license to the last day of the Licensee's accounting period and subsequent financial years shall run from the day immediately following the last day of the preceding accounting period up to the last day of the accounting period.

(6) A distribution licensee shall obtain the Commission's consent to dispose its relevant asset worth ₦5 Million Naira and above.

(7) A distribution licensee shall develop a policy with respect to the manner by which it intends to comply with its duties and obligations under applicable environmental laws in force in Nigeria.

(8) A distribution licensee shall submit to the Commission a monthly customer complaints report and a monthly customer complaints register in accordance with the requirements of the Thirty-eighth and Thirty-ninth Schedules to these Regulations, respectively.

CHAPTER III—GENERAL

8.—(1) In these Regulations, unless the context otherwise requires—

“*Act*” means the Electric Power Sector Reform Act, 2005 ;

“*Accounts*” means to form a particular amount of investment or money ;

“*Chairman*” means the Chairman/Chief Executive Officer of the Commission, in his absence the Vice-Chairman and in his absence, any Commissioner appointed to act in that behalf ;

“*Commission*” means the Nigerian Electricity Regulatory Commission ;

“*Codes*” means collection of rules, regulations that are consolidated and classified according to subject matter, like Grid Code, Metering Code ;

“*Distribution Licence*” means a licence granted under Section 67 (1) of the Act ;

“*Generation Licence*” means a licence granted under Section 64 (1) of the Act ;

“*Licence*” shall include all licences which the Commission is empowered to grant under the Act ;

“*Licensee*” means any person who holds a licence issued by the Commission ;

“*Market Rules*” means rules approved under section 26 (2) of the Act ;

“*Market Operator*” means the Licenced Institution (usually, but not always under the Transmission Licence holder) that is responsible for the administration

of the market by ensuring effective trading arrangement and settlements of market participants invoices ;

“*Month*” means a calendar month ;

“*Officer*” means a staff or authorized representative of the Commission ;

“*Person*” includes an individual, a company, partnership or any association of individuals, whether incorporated or not ;

“*Regulation*” means body of rules made pursuant to Section 96 of the Act ;

“*System Operation Licence*” means a licence granted under Section 66 (1) of the Act ;

“*Trading Licence*” means a licence granted under Section 68 (1) of the Act ;

“*Transmission Licence*” means a licence granted under Section 65 (1) of the Act ; and

“*Wheeling Charge*” means a charge for transportation of electricity generated from a Power Station to different Transmission/Distribution stations.

(2) Words importing any one gender includes the other gender and the singular includes the plural and vice versa.

(3) Words or expressions used in these Regulations but not defined, unless the context otherwise requires, shall have the same meanings respectively assigned to them in the Act.

9.—(1) These Regulations may be cited as the Nigerian Electricity Regulatory Commission's Reporting Compliance Regulations, 2012. Citation.

(2) All actions and decisions by the Commission in respect of the subject matter of these Regulations, before the Commencement of these Regulations shall be deemed to have been done or taken by the Commission pursuant to these Regulations.

**PARTICULARS OF MEMORANDUM
AND ARTICLES OF ASSOCIATION**

<i>S/No.</i>	<i>Event</i>	<i>Report to be Submitted</i>
1.	Any changes in ownership structure exceeding 5% of the authorized share capital.	(i) Resolution on from the company authorizing such change. (ii) Form CO2.
2.	Change of Directors.	Form CO7.
3.	Any increase in issued share capital exceeding 5%.	(i) Ordinary resolution for the increase in share capital. (ii) Statement of Increase duly stamped.
4.	Any reduction in the authorized share capital.	Resolution for the reduction in Share Capital.
5.	Any resolution passed at any General Meeting, if it is related to the Licensed activity.	Notification of the Resolution so passed.
6.	Change in Objects of Company.	Amended Memo and Articles duly filed with CAC.
7.	Change in key Management staff of the Company.	Notification of such change and submission of CVs of the new Management.
8.	Change in the Company's registration details effected at the Corporate Affairs Commission.	Notification of such change to the Commission.
9.	Provision of electricity to customers by licensee and an affiliated licensee.	The affiliates should provide a Compliance Plan setting out the system, policies and mechanisms that each intend to use to ensure that they and their officers, employees, agents and contractors comply with the Code of Conduct Regulation of NERC.

SECOND SCHEDULE

regulation 2(a)

HEALTH AND SAFETY REPORTING FORMAT

	<i>Report items</i>	<i>Comments</i>
1.	Company Name Company Division Report Year Report Month Date and Time of Incident Name and Status of Person making report Time of Incident.	
2.	Date of Incident Report Location of Incident Person(s) Involved Person(s) Employed by Electric Company Sex Age Occupational Status Incident reported to Police, Health Authorities <i>etc.</i>	
3.	Type of Injury Nature of Injury Facility(s) Resulting Equipment Involved Is Incident part of work process? Consequence of Incident Lost Time to Incident.	
4.	Operating Voltage System Voltage System Type Is Earthing Provided? Other Protection Device operated.	
5.	Overhead Line: Height Overhead Line: Live Substation Type Is Substation Fenced? Type of Fence Substation Modifications Other Party Apparatus/Equipment Involved.	
6.	Brief Facts about Incident.	

HEALTH AND SAFETY MANAGEMENT REPORTING FORMAT

<i>Reporting items</i>	<i>Comments</i>
Company Details — Company Name Company Address Report Year Report Month and Quarter Status of Person Making Report.	
Incidents in the — Number of Incidents (injuries Period and fatalities). Number of fatalities Number of Near Hits (including injuries and fatalities). Number of near Misses Lost Time to Accidents (LTA). Lost Time to Injuries (LTI). Other information on incidents.	
Commitment to — Health and Safety training given to Health and Safety staff during the period. Amount devoted to Health and Safety during the period. Name and contact address of most senior person in charge of Health and Safety. Health and Safety program for rest of year. Other information on Health and Safety in the company.	

NERC

A. Notice of Significant event Reporting in Nigeria Electricity Industry

REQUIRED DATA FOR COMPUTATION OF KEY PERFORMANCE INDICATORS FOR GENERATION COMPANIES

S/No.	KPIs	Data Description	Units	Data	Frequency of Reporting	Actual Performance
	TECHNICAL PERFORMANCE INDICATORS					
1.	Station Load factor	Total Energy Generated	MWh		Monthly	
		Available Capacity x Hrs of Month reporting	MWh		Monthly	
2.	Megawatts hours lost due to grid disturbance	Total Outage Time (Hrs) due to grid disturbance	Hrs		Monthly	
3.	Megawatts hours lost due to failure within the Power Station	Megawatts hours lost due to failure within the Power Station	MWh		Monthly	
4.	Number of failures leading to loss of more than 20% rated output	Number of failures leading to loss of more than 20% rated output	No.		Monthly	
5.	Capacity Utilization Index	Available Capacity	MW		Monthly	
		Installed Capacity	MW		Monthly	
6.	Planned Output Capacity for the reporting period	Planned output Capacity for the reporting period	MW		Monthly	
7.	Achieved Output Capacity for the reporting period	Achieved output Capacity for the reporting period	MW		Monthly	
8.	Generation Utilization Index	Average Actual Generation (MW)	MW		Monthly	
		Available Capacity (MW)	MW		Monthly	
9.	Station Reliability Index	Number of Available Units (N)	No.		Monthly	
		Reporting Period (Hrs)	Hrs		Monthly	
		Number of Unavailable Units (n)	No.		Monthly	
		Down time of Unavailable Units (t)	Hrs		Monthly	
10.	Average Plant Heat Rate (J/MWH)	Volume of Gas Consumed	M ³		Monthly	
		Calorific Value of Gas	J/M ³		Monthly	
		Total Energy Generated	MWh		Monthly	
11.	Planned Maintenance Index	Number of Routine preventive maintenance rectified	No.		Monthly	
		Number of Routine preventive maintenance reported	No.		Monthly	
12.	Breakdown Maintenance Index	Number of Breakdown defects rectified	No.		Monthly	
		Number of Breakdown defects reported	No.		Monthly	
13.	Total De-rated Energy (TDE)	Unplanned De-rated Energy (UDE)	MWh		Monthly	
		Planned De-rated Energy (PDE)	MWh		Quarterly	
14.	Total Outage Hours (TOH)	Unplanned Outage Hours (UOH)	Hrs		Monthly	
		Planned Outage Hours (POH)	Hrs		Monthly	

REQUIRED DATA FOR COMPUTATION OF KEY PERFORMANCE INDICATORS FOR GENERATION COMPANIES—continued

B 648

<i>S/No.</i>	<i>KPIs</i>	<i>Data Description</i>	<i>Units</i>	<i>Data</i>	<i>Frequency of Reporting</i>	<i>Actual Performance</i>
15.	Total Number of Units	Total Number of Units in the Station	No.		Monthly	
16.	Total Number of Units out of service for more than 30 days	Total Number of Units out of service for more than 30 days	No.		Quarterly	
17.	Total Number of Units Back in Service after 30 days	Total Number of Units Back in Service after 30 days	No.		Quarterly	
18.	New Generation Capacity Added (MW)	New Generation Capacity Added	MW		Annual	
19.	Number of New Generating Units Commissioned	Number of New Generating Units Commissioned	No.		Annual	
20.	Number and Capacity of Generating Units Under Construction	Number and Capacity of Generating Units Under Construction	No. & MW		Annual	
21.	Number and Capacity of Generating Units Under Rehabilitation	Number and Capacity of Generating Units Under Rehabilitation	No. & MW		Bi-Annual	
22.	Number of Generating Units Decommissioned	Number of Generating Units Decommissioned	No.		Annual	
23.	Total Energy consumed by the Station	Total Energy Generated Total Energy Delivered to Transmission	MWh MWh		Monthly Monthly	
24.	Total Volume of Gas Supplied	Total Volume of Gas Supplied	MMSCF		Monthly	
25.	Total Volume of Gas Required	Total Volume of Gas Required	MMSCF		Monthly	
26.	No. of Gas Supply Interruptions	No. of Gas Supply Interruptions	No.		Monthly	
27.	Total Duration of Gas Supply Interruptions	Duration of Gas Supply Interruptions	Hrs		Monthly	
28.	Total Megawatt Lost due Gas Supply Interruptions	Megawatt Lost due Gas Supply Interruptions	MW		Monthly	
29.	Lake Level: Maximum, Current and Minimum Levels	Lake Level: Maximum, Current and Minimum Levels	Meters		Monthly	
FINANCIAL PERFORMANCE INDICATORS						
30.	Generation Unit Cost	Total Expenditure Total Energy Generation	Naira MWh		Monthly Monthly	

REQUIRED DATA FOR COMPUTATION OF KEY PERFORMANCE INDICATORS FOR GENERATION COMPANIES—continued

<i>S/No.</i>	<i>KPIs</i>	<i>Data Description</i>	<i>Units</i>	<i>Data</i>	<i>Frequency of Reporting</i>	<i>Actual Performance</i>
31.	Staff Cost Index	- Total Staff Expenditure	Naira		Monthly	
		No. of Full Time Employees	No.		Quarterly	
32.	Staff Productivity Index	Total Energy Generated	MWh		Quarterly	
		No. of Full Time Employees	No.		Quarterly	
33.	Cost of Planned Maintenance	Cost of Planned Maintenance	Naira		Monthly	
34.	Cost of Breakdown Maintenance	Cost of Breakdown Maintenance	Naira		Monthly	
35.	Cost of New Generation Capacity Added	Cost of New Generation Capacity Added	Naira		Annual	
36.	Cost of New Generation Units Commissioned	Cost of New Generation Units Commissioned	Naira		Annual	
37.	Cost of Generating Units under Rehabilitation	Cost of Generating Units under Rehabilitation	Naira		Bi-Annual	
38.	Cost of Generating Units Decommissioned	Cost of Generating Units Decommissioned	Naira		Annual	
39.	Cost of Fuel	Cost of Fuel	Naira		Monthly	
40.	Total Investment Planned Cost	Total Investment Planned Cost	Naira		Annual	

REQUIRED DATA FOR COMPUTATION OF KEY PERFORMANCE INDICATORS FOR TRANSMISSION COMPANY OF NIGERIA (TCN)

50

S/No.	KPIs	Data Description	Units	Data	Frequency of Reporting	Actual Performance
TECHNICAL PERFORMANCE INDICATORS						
1.	System Average Interruption Duration Indicator (SAIDI)	Duration of Each Interruption (Hrs)	Hrs		Monthly	
		Number of Interruptions	No.		Monthly	
		Total Number of Delivery Points	No.		Monthly	
2.	System Average Interruption Frequency Indicator (SAIFI)	Number of Interruptions	No.		Monthly	
		Total Number of Delivery Points	No.		Monthly	
3.	Overall System Transmission Lines Unavailability	Total Lines Outage Time (Hrs)	Hrs		Monthly	
		Total Reporting Time (Hrs)	Hrs		Monthly	
4.	System Average Restoration Index	Total Duration of All Interruptions (Hrs)	Hrs		Monthly	
		Total Number of Sustained Interruptions	No.		Monthly	
5.	Load Shedding Severity Index (LSSI)	Unsupplied Power In Mw Due To Load shedding	Mw		Quarterly	
		System Peak Load	Mw		Quarterly	
6.	Average Forced Outage Duration For Faults	Forced Outage Hours For Transmission Equipment	Hrs		Monthly	
		Number of Forced Outage Incidents	No.		Monthly	
7.	Transformers Capacity Utilization	Average Maximum Transformers Loading (MVA)	MVA		Monthly	
		System Installed Transformer Capacity (MVA)	MVA		Monthly	
8.	Total Time Of Interrupting Transmission Lines Per Km	Total Interruption Time (Hrs)	Hrs		Monthly	
		Total Transmission Lines Length (Km)	Km		Monthly	
9.	Maximum, Average and Minimum System Frequency	Maximum, Average And Minimum System Frequency(Hz)	Hz		Monthly	
10.	Maximum, Average and Minimum System Voltages	Maximum, Average And Minimum System Voltages	Kv		Monthly	
11.	System Collapses Index	Total number of system collapses (partial & total for the 2 islands)	No.		Monthly	
12.	Transmission Losses	Total Energy Injected Into The Grid (MWh)	MWh		Monthly	
		Total Energy Sent Out (MWh)	MWh		Monthly	
13.	Internal Utilization	Energy Received From Gencos At TCN Metering Point	MWh			
		Energy Sent Out To Discos From Ten Metering Point	MWh			
14.	Number of Significant Incidents Recorded	Number of Significant Incidents Recorded	No.		Monthly	

FOURTH SCHEDULE

Regulation 2(c)

REQUIRED DATA FOR COMPUTATION OF KEY PERFORMANCE INDICATORS FOR TRANSMISSION COMPANY OF NIGERIA (TCN)—*contd.*

<i>S/No.</i>	<i>KPIs</i>	<i>Data Description</i>	<i>Units</i>	<i>Data</i>	<i>Frequency of Reporting</i>	<i>Actual Performance</i>
15.	New Transmission Lines Length Added (Km).	New Transmission Lines Length Added (Km)	Km		Annual	
16.	New Transmission Lines Length Work In Progress (Km)	New Transmission Lines Length Work In Progress (Km)	Km		Annual	
17.	New Transformation Capacity Added (MVA)	New Transformation Capacity Added (MVA)	MVA		Bi-Annual	
18.	New Transformation Capacity Work In Progress (MVA)	New Transformation Capacity Work In Progress (MVA)	MVA		Bi-Annual	
19.	Total Length Of Transmission Lines (Km)	Total Length Transmission Lines (Km)	Km		Annual	
20.	Total System Transformation Capacity (MVA)	Total System Transformation Capacity (MVA)	MVA		Quarterly	
21.	Number of Shutdowns <i>per</i> Month <i>per</i> GSPS, Averaged across All BSPS caused by failure of Overloading of Part or all of the Transmission System	Number of Shutdowns <i>per</i> Month <i>per</i> GSPS, Averaged across all BSPS caused by failure of Overloading of part or all of the Transmission System	No.		Monthly	
22.	Number and Capacity of New Power Stations , DCCS and BSPS that have Signed Connection Agreements (Tabulate Formats Including Name, Capacity, Connection Date Requested And Anticipated Delay)	Number and Capacity of New Power Stations, DCCS and BSPS that have signed Connection Agreements (Tabulate Formats including name, Capacity, Connection Date requested and Anticipated Delay)	No./MW		Annual	
23.	Percentage Sub-Stations Covered By SCADA Systems	Percentage Sub-Stations Covered By SCADA Systems	%		Quarterly	
24.	Staff Productive Index	Total Energy Transmitted to Disco Total Number of Employees (Full-Time, Part-Time and Casual)	MWh. No.		Monthly Monthly	

TRANSMISSION EQUIPMENT REPORTING ON CONDITIONS OF TRANSFORMERS							
<i>S/No.</i>	<i>Region</i>	<i>Station</i>	<i>Equipment Unavailable</i>	<i>Effective Date</i>	<i>Equipment Downtime Day(s)</i>	<i>Cause(s)</i>	<i>Remarks</i>
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							
13.							
14.							
15.							

SIXTH SCHEDULE

regulation 2(e) B 654

TRANSMISSION EQUIPMENT REPORTING ON CONDITIONS OF CIRCUIT BREAKERS							
S/No.	Region	Station	Equipment Unavailable	Effective Date	Equipment Downtime Day(s)	Cause(s)	Remarks
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							
13.							
14.							
15.							

TRANSMISSION EQUIPMENT REPORTING ON CONDITIONS OF REACTORS							
<i>S/No.</i>	<i>Region</i>	<i>Station</i>	<i>Equipment Unavailable</i>	<i>Effective Date</i>	<i>Equipment Downtime Day(s)</i>	<i>Cause(s)</i>	<i>Remarks</i>
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							
13.							
14.							
15.							

EIGHTH SCHEDULE

regulation 2(g)

B 656

TRANSMISSION EQUIPMENT REPORTING ON CONDITIONS OF GROUND SWITCHES							
<i>S/No.</i>	<i>Region</i>	<i>Station</i>	<i>Equipment Unavailable</i>	<i>Effective Date</i>	<i>Equipment Downtime Day(s)</i>	<i>Cause(s)</i>	<i>Remarks</i>
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							
13.							
14.							
15.							

NINTH SCHEDULE

regulation 2(h)

TRANSMISSION EQUIPMENT REPORTING ON CONDITIONS OF 132 KV TRANSMISSION LINE							
S/No.	Region	Station	Equipment Unavailable	Effective Date	Equipment Downtime Day(s)	Cause(s)	Remarks
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							
13.							
14.							
15.							

TENTH SCHEDULE

regulation 2(i)

B 658

TRANSMISSION EQUIPMENT REPORTING ON CONDITIONS OF 330Kv TRANSMISSION LINE							
S/No.	Region	Station	Equipment Unavailable	Effective Date	Equipment Downtime Day(s)	Cause(s)	Remarks
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							
13.							
14.							
15.							

TRANSMISSION EQUIPMENT REPORTING ON CONDITIONS OF ISOLATORS							
<i>S/No.</i>	<i>Region</i>	<i>Station</i>	<i>Equipment Unavailable</i>	<i>Effective Date</i>	<i>Equipment Downtime Day(s)</i>	<i>Cause(s)</i>	<i>Remarks</i>
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							
13.							
14.							
15.							

TRANSMISSION EQUIPMENT REPORTING ON CONDITIONS OF COMMUNICATION/SCADA							
S/No.	Region	Station	Equipment Unavailable	Effective Date	Equipment Downtime Day(s)	Cause(s)	Remarks
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							
13.							
14.							
15.							

REQUIRED DATA FOR COMPUTATION OF KEY PERFORMANCE INDICATORS FOR ELECTRICITY DISTRIBUTION COMPANIES

S/No.	KPIs	Data Description	Units	Data	Frequency of Reporting	Actual Performance
TECHNICAL PERFORMANCE INDICATORS						
1.	System Average Interruption Duration Indicator (SAIDI)	Total Duration of Interruption (Hrs)	Hrs		Monthly	
		Total Number of Interruptions to Customers	No.		Monthly	
		Total Number of Registered Customers	No.		Monthly	
2.	System Average Interruption Frequency Indicator (SAIFI)	Total Number of System Interruptions	No.		Monthly	
		Total Number of Supply Points affected (from Distribution Transformer Uprisers)	No.		Monthly	
3.	Customer Average Interruption Duration Indicator (CAIDI)	SAIDI	SAIDI		Monthly	
		SAIFI	SAIFI		Monthly	
4.	Customer Average Interruption Frequency Indicator (CAIFI)	Total Number of Customer Interruptions	No.		Monthly	
		Total number of Registered Customers	No.		Monthly	
5.	HV Faults Clearance Index	No. of 33Kv and 11Kv Faults cleared within 8hrs	No.		Monthly	
		Total 33Kv and 11Kv faults reported	No.		Monthly	
6.	LV Faults Clearance Index	No. of LV faults cleared within 8hrs	No.		Monthly	
		Total LV faults reported	No.		Monthly	
7.	Distribution Losses	Energy delivered to Distribution Company (KWH)	KWh		Monthly	
		Energy Billed (KWH)	KWh		Monthly	
8.	Technical Losses	Physical Losses Due to Electricity Flow in Distribution Network	KWh		Monthly	
		New KVA Distribution Capacity Added	KVA		Quarterly	
		Distribution Capacity KVA Work in Progress	KVA		Quarterly	
9.	New Distribution Lines Length Added.	New Distribution Lines Length Added.	K M		Quarterly	

<i>S/No.</i>	<i>KPIs</i>	<i>Data Description</i>	<i>Units</i>	<i>Data</i>	<i>Frequency of Reporting</i>	<i>Actual Performance</i>
TECHNICAL PERFORMANCE INDICATORS						
10.	Distribution Lines Length Work in Progress	Distribution Lines Length Work in Progress	KM		Quarterly	
FINANCIAL PERFORMANCE INDICATORS						
11.	Ratio of Capacity of relieve Sub-stations or upgraded Capacity of Sub-stations to distribution system requirement	Capacity of new Sub-stations/relieve added (KVA)	KVA		Quarterly	
		Capacity of new Sub-stations/relieve required (KVA)	KVA		Quarterly	
12.	Staff Cost Index	Total staff Expenditure (Naira)	Naira		Monthly	
		Total Number of Full Time Employees	No.		Monthly	
13.	Staff Productivity Index	Total Cash Collected by the Distribution Company (Naira)	Naira		Monthly	
		Total Number of Full Time Employees	No.		Monthly	
14.	Distribution Unit Cost	Total Expenditure (Naira)	Naira		Monthly	
		Energy delivered to Distribution Company (KWH)	KWh		Monthly	
TECHNICAL PERFORMANCE INDICATORS						
15.	Billing Efficiency	Total Energy Billed (KWH)	KWh		Monthly	
		Total Energy Billed (NAIRA)	Naira		Monthly	
		Total Energy Received (KWH)	KWh		Monthly	
16.	Collection Efficiency	Revenue Collected (Naira)	Naira		Monthly	
		Closing Balance (Naira)	Naira		Monthly	
		Revenue Billed (Naira)	Naira		Monthly	
17.	Naira per KWh Indicator	Total Cash Collected (Naira)	Naira		Monthly	
		Total Energy Delivered to Distribution Company	KWh		Monthly	
18.	Outstanding Debt at Month End	Outstanding Debt at Month End	Naira		Monthly	

REQUIRED DATA FOR COMPUTATION OF KEY PERFORMANCE INDICATORS FOR ELECTRICITY DISTRIBUTION COMPANIES—*contd.*

<i>S/No.</i>	<i>KPIs</i>	<i>Data Description</i>	<i>Units</i>	<i>Data</i>	<i>Frequency of Reporting</i>	<i>Actual Performance</i>
19.	Cost of New MVA Distribution Capacity Added	Cost of New MVA Distribution Capacity Added	Naira		Quarterly	
20.	Cost of Distribution Capacity MVA Work in Progress	Cost of Distribution Capacity MVA Work in Progress	Naira		Quarterly	
21.	Cost of New Distribution Lines Length Added	Cost of New Distribution Lines Length Added	Naira		Quarterly	
22.	Total Investment Planned Cost	Total Investment Planned Cost	Naira		Annual	
TECHNICAL PERFORMANCE INDICATORS						
23.	Cost of Distribution Lines Length Work in Progress	Cost of Distribution Lines Length Work in Progress	Naira		Quarterly	
CUSTOMER SERVICE PERFORMANCE INDICATORS						
24.	New Service Average Connection Time Indicator	Average Time taken to connect a New Customer from the point of application	Days		Monthly	
		Total Number of New Customers connected	No.		Monthly	
25.	Number of New Service Connections	Number of New Service Connections	No.		Monthly	
26.	Response to Customer Complaints Index	Total time taken to respond to Customer Complaints (Hrs)	Hrs		Monthly	
		Total Number of Complaints received	No.		Monthly	
		Total No. of Customers Complaints resolved	No.		Monthly	
27.	Meter Reading Frequency	Total No. Meters read	No.		Monthly	
		Total No. of Meters in the System	No.		Monthly	
28.	Pre-Payment Metering Ratio	Number of New Pre-Payment Meters Installed in the Month	No.		Monthly	
		Total Number of Pre-Payment Meters Required	No.		Monthly	
29.	Percentage of Customers metered	Percentage of Customers metered	%		Quarterly	

THIRTEENTH SCHEDULE

regulation 2(l)

B 664

REQUIRED DATA FOR COMPUTATION OF KEY PERFORMANCE INDICATORS FOR ELECTRICITY DISTRIBUTION COMPANIES—contd.

<i>S/No.</i>	<i>KPIs</i>	<i>Data Description</i>	<i>Units</i>	<i>Data</i>	<i>Frequency of Reporting</i>	<i>Actual Performance</i>
30.	Total Number of Customers by Classification	Total Number of Customers by Classification	No.		Quarterly	
TECHNICAL PERFORMANCE INDICATORS						
31.	R.E.D. ANALYSIS	Number of Read Meters - R	No.		Monthly	
		Number of Estimatec Meters - E	No.		Monthly	
		Number of Direct Connections on Fixed Code - D	No.	No.	Monthly	
		Total Number of Billed Customers	No.		Monthly	
		Energy Billed for Read Customers	KWh		Monthly	
32.	Customer Payment Response Rate	No. of credit Customers who paid bills	No.		Monthly	
		Total Number of Credit Customers	No.		Monthly	
33.	Number of Significant Incidents Recorded	Number of Significant Incidents Recorded	No.		Monthly	
34.	Customer Satisfaction Survey	Customer Satisfaction Survey	—		Bi-Annually	
35.	Customer Metering Ratio	No. of Customers with Functional Meters	No.		Quarterly	
		Total Number of Customers	No.		Quarterly	
36.	REBICOL Cycle	No. of Days from Meter Reading to Payment	No.		Monthly	

FOURTEENTH SCHEDULE

regulation 2(m)

SIX-MONTHLY REPORT ON DEROGATION REQUESTS BY DISCO
(please attach relevant documents and details)

DISCO NAME : _____

PERIOD : From _____ To _____

S/No.	Party	Title of Derogation Request	Date Request Received	Description (Details of Equipment, Connection Point, Nature and extent of Non-compliance)	Provision(s) in Distribution Code for which Derogation is sought	Reason for Non-compliance	Remedial Action (if any and Date by which Compliance could be achieved)	Status of Request
1.								
2.								
3.								
4.								
5.								
6.								

DISCO _____

DATE _____

SIX-MONTHLY REPORT ON APPROVED DEROGATION REQUESTS BY DISCO
(please attach relevant documents and details)

DISCO NAME : _____

PERIOD : From _____ To _____

S/No.	Party	Title of Derogation Request	Date Request Received	Description (Details of Equipment, Connection Point, Nature and extent of Non-compliance)	Provision(s) in Distribution Code for which Derogation is sought	Date Request Received	Date Derogation Approved	Reasons for Approval	Progress of Remedial Action to achieve compliance

DISCO _____

DATE _____

SIXTEENTH SCHEDULE

B 667
regulation 2(n)REGISTER OF APPROVED DISTRIBUTION CODE DEROGATIONS
(please attach relevant documents and details)NAME OF APPROVING AUTHORITY : _____
(Disco or NERC)

<i>S/No.</i>	<i>Date of Approval</i>	<i>Name of Party for Approved Derogation</i>	<i>Relevant Provision of Distribution Code Affected</i>	<i>Period of Derogation</i>

DISCO_____
DATE

DISTRIBUTION LOAD SHEDDING PLAN
(please give details and rosters. To be regularly updated)

33KV

Automatic Load Shedding

User Demand Reduction including Voltage Reduction and System Frequency Reduction

Reduction of Load in Planned Discrete Blocks

Load-Shedding Exemption Policy

Rotational Load Shedding

Communication Plan

11KV

As in 33KV

415V

Rotational Load Shedding

Load Shedding Exemption Policy

Communication Plan

EIGHTEENTH SCHEDULE
5-YEAR DEMAND FORECAST

B 669
regulation 2(v)

(please attach relevant documents and details)

PERIOD: FROM _____ TO _____

Year	Pessimistic Forecast	Realistic Forecast	Optimistic Forecast
1.			
2.			
3.			
4.			
5.			

DEMAND FORECAST FACTORS (using geographically based methodology).

Historical demand data:

Current and anticipated future land use.

Population and demographic forecasts.

Economic growth rates.

Other information supplied by users.

NINETEENTH SCHEDULE

*regulation 2(p)*5-YEAR DISTRIBUTION PLAN
(please give details)

PERIOD: FROM _____ TO _____

Energy and Demand Forecasts For 5 Years	
Distribution Feeder Routing And Sizing	
Reactive Power Consumption Plan	
Voltage Drop Studies	
System Loss Studies	
Distribution Reliability Studies	
Losses Reduction Plan	
Other Distribution Reinforcement Plans	
User Data as Inputs	
Technical Analysis	
Economic Analysis	

NEW EMPLOYEE SAFETY ORIENTATION TRAINING CHECKLIST

(To Be Completed By Employee & Supervisor; Return To Payroll)

Employee Name.....Job Title.....

Supervisor's Name.....Department.....

ALL EMPLOYEE WILL BE TRAINED ON THE FOLLOWING TOPICS

THE INJURY AND ILLNESS PREVENTION PROGRAM (IIPP)

- ☐ Discussed "Report of Unsafe Condition or Hazard" Form
- ☐ Employee has received "Code of Safe Practices" and forwarded signed acknowledge to payroll.
- ☐ Informed of the Duties and Responsibilities of Safety Officers, Safety Committees, Management and Employees
- ☐ Materials Safety Data Sheets (MSDS) 800-451-8346
- ☐ Reporting of Work-Related Injuries (3-Step Process)
- ☐ Location Of Safety Manual (Injury and Illness Prevention Plan)
- ☐ Chemical Safety/Personal Protective Equipment

FIRE SAFETY, EMERGENCY AND DISASTER PREPAREDNESS

- ☐ Designated Evacuation Assembly Points
- ☐ Emergency Action Plans
- ☐ Emergency escape routes
- ☐ List of emergency phone numbers
- ☐ Types of fires
- ☐ Types of fire extinguishers

LOCATIONS

- ☐ Location of fire alarm
- ☐ Location of Safety Postings
- ☐ Location and use of fire extinguishers
- ☐ Location Of Automatic External Defibrillator (AED)
- ☐ Location of natural gas shut-off

CERTIFICATION (if applicable)

Signature of Trainer

Signature of Employee

CERTIFICATIONS (if applicable)

- ☐ Fire extinguisher
- ☐ CPR
- ☐ Automatic External Defibrillator (AED)
- ☐ First Aid

RECORD OF SAFETY ORIENTATION TRAINING

ERGONOMICS PROGRAM

- ☐ Overview of RMIS (Repetitive Motion injuries)
- ☐ Proper lifting
- ☐ Safe work practice
- ☐ Workstation evaluation

UNIFORM/ATTIRE

- ☐ Discuss appropriate attire
- ☐ Discuss appropriate footwear

OTHER REQUIRED TRAINING

- ☐ Hazard Communication
- ☐ Blood Borne Pathogen
- ☐ Ladder
- ☐ Hand Cart / Dolly

List.....

List.....

List.....

List.....

Date.....

Date.....

FORWARD SIGNED COPY TO PAYROLL TO BE PLACED IN EMPLOYEE'S PERSONNEL FILE

DEPARTMENTAL NEW EMPLOYEE SAFETY ORIENTATION

Employee Name :

Job Title : SSN :

Topics 1-4 are contained in the Departmental Emergency Operations Plans, Reviewing this plan during the orientation will more than meet the requirements of these first few topics.

☐ 1. REPORTING EMERGENCIES

Tell and show the new employee(s) the police, medical and fire emergency reporting number(s) for their work area.

General

Police - Medical - Fire

5566

The emergency number should be posted on all telephones.

Your Dept., Div., Unit, Worksite, etc		
Name		
Location	Emergency Service(s)	Phone No

☐ 2. EMERGENCY EVACUATION

Walk new employees through the appropriate emergency evaluation route for their work area. Also clear out the emergency evaluation route to be used of all obstacles at all times. Show where to assemble after evacuation. Discuss special evacuation needs and plans with disabled employees. (Building evacuation floor plans available from safety)

☐ 3. LOCAL FIRE ALARM SIGNALING SYSTEM

Show new employees where fire alarm pull stations are and instruct them in their use. Let them know that activating the pull station sounds an alarm in the building to alert other occupants to evacuate. Describe what the alarm in your building sounds like (a bell, chimes, a slow whoop).

- Tell your new employee that they must leave the building immediately upon hearing the alarm, closing doors behind them.
- When employees discover a fire, they should first pull station and exit the alarmed area. If possible, employees should follow up with a telephone call from a safe location to provide more details.
- On site : the activation of a fire alarm pull station also sends a signal to the Department of Safety and Fire Department showing the location of the emergency.

☐ 4. PORTABLE FIRE EXTINGUISHERS

Show the employee(s) where portable fire extinguishers are located. Tell them to use a portable fire extinguisher only if :

- They have been trained to use them,
- The fire alarm has been sounded first,
- The fire is small (wastebasket size)
- They have a clear evacuation route.

TWENTY-FIRST SCHEDULE

DEPARTMENTAL NEW EMPLOYEE SAFETY ORIENTATION—contd.

☐ 5. PORTABLE FIRE EXTINGUISHERS

Tell your new employee(s) to immediately report accidents, incidents, near misses, motor vehicles accidents, and any unsafe conditions or acts to (usually their supervisor) :

Name	Phone Number
Location :	

- (a) *Report Accidents and Incidents*

Explain that after they immediately report on-the-job accidents, they have to fill out an accident report form.

Explain the form and tell them where the forms are located. All accidents must be reported on this form regardless of the extent of injury.

Reporting all accidents and incidents helps the company and the employing department initiates effective safety programs and accident prevention measures.

- (b) *Report Motor Vehicle Accidents*

All automobile accidents in company-owned vehicles must be reported to the Department of Safety (X5566) immediately, whether or not there appears to be personal injury or property damage.

- (c) *Report Unsafe Conditions and Acts*

Along with immediately reporting unsafe conditions and acts to their supervisors or the person noted above, employees may report safety problems to the company safety.

Explain that employees should take responsibility for correcting unsafe conditions when feasible, e.g. wiping up small, nontoxic spills and removing tripping hazards.

☐ 6. WORKERS' COMPENSATION AND INDUSTRIAL INSURANCE

Tell workers that work-related injuries or illnesses resulting in medical expenses or time loss are covered by Workers' Compensation. To establish a Workers' Compensation claim, employees must fill out the appropriate paperwork. Contact Human Resources for additional information. Explain, also that prompt reporting of accidents to you, the supervisor, will make the claims process easier and may allow you to find them modified work during their recovery.

☐ 7. FIRST AID

Tell new employees where first aid kits are located. Explain what actions employees should take if they or others are injured. If safety showers or eye wash stations are located in your department, show new employees where they are and instruct them in their use.

☐ 8. HAZARD COMMUNICATION (CHEMICAL SAFETY)

(Worker Right-to-know)

(Refer to Company Safety)

- Tell new employees where hazardous materials are used or stored in their work area.
- Explain the labeling system for these materials.
- Shows employees where material safety data sheets (MSDS) are located or explain how they can obtain an MSDS.
- If new employees will be working with hazardous materials, tell them they will be receiving training in the safe handling of these materials or conduct the training at this time, if appropriate.

DEPARTMENTAL NEW EMPLOYEE SAFETY ORIENTATION—*contd.*

Hazardous Communication Training is conducted by Supervisors or a Designated Departmental Trainer.

- Inform new employees that hazardous materials emergencies, such as spills or releases too big for them to clean up, are to be reported to:

	Who	Phone Number
Small Spills		
Large Spills or releases		

Report large spills to Safety Department at X5566

- Explain the hazardous materials waste disposal procedures that apply in your area.

(b) Specific Worksites

Office Staff

For staff whose only chemical exposures are in an office environment.

- Discuss hazard information and protection measures for products they will work with.
- Explain an MSDS and tell employees where they are located or how to obtain them.

Laboratory Staff

The laboratory supervisor or staff must provide additional training, specific to the chemicals in the laboratory.

Non-Laboratory Hazardous Chemicals

Employees who work with chemicals in non-laboratory environments must receive detailed hazard communication training from their supervisor or designated departmental HazCom trainer. (Employees who fall into this category include maintenance, custodial/housekeeping, food service and printing and copy/duplicating employees.)

☐ 9. WORKSITE WARNING SIGNS AND LABELS

Explain to all new employees the meaning of warning signs, tags, and labels used in their work area.

☐ 10. PERSONAL PROTECTIVE EQUIPMENT (PPE)

Check the personal protective equipment needed for this job.

Gloves	Hard Hats
Safety Glasses, Goggles, Face Shield	Hearing Protectors
Personal Protective Clothing	Fall Protection
Orange Safety Vest	Safety Shoes
Respirator	

Explain precisely the use, care, cleaning, and storage of any personal protective equipment the new employee will be required to use on the job. Stress the need for strict adherence to department, division, unit and/or lab policy on the use of PPE.

DEPARTMENTAL NEW EMPLOYEE SAFETY ORIENTATION—contd.

☐ 11. EMPLOYEE SAFETY AND HEALTH TRAINING

Use the following list to indicate the safety and health training classes the new employee will be required to take for their job. Recommended classes could also be marked but priority must be given to arranging the required health and safety training classes.

☐ 12. SAFETY AND HEALTH COMMITTEE(S) AND/OR SAFETY MEETINGS

Tell new employees about the organizational Health and Safety Committees and about the departmental Health and Safety committee, and health and safety meetings, if applicable. Tell them who their safety committee representatives are and how to contact them.

☐ 13. SAFETY BULLETIN BOARD

Point out the departmental safety bulletin board and tell them what items can be found on the board.

- *Other safety notices, newsletters, safety and health committee minutes, etc. should be posted here also.*

☐ 14. DEPARTMENTAL/WORKSITE SAFETY PRACTICES AND RULES

Conduct an on-the-job review of the practices necessary to perform the initial job assignments in a safe manner. Employees should understand that supervisors will provide job safety inspections on a continuing basis. Reviewing safety rules for your department (e.g. non-smoking areas, working alone, safe use of chemicals, biohazards, radioactive materials, etc.)

☐ 15. TOUR DEPARTMENT/FACILITIES REVIEWING WORKSITE HAZARDS

Encourage your employees to ask questions and to develop a sense of safety consciousness.

regulation 2(r)

NERC's Accident Reporting Form

Attention: This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.

Year

Log of Work-Related Injuries and Illnesses

You must record information about every work-related injury or illness that involves loss of consciousness, restricted work activity or job transfer, days away from work, or medical treatment beyond first aid. You must also record significant work-related

Establishment Name _____

City

State

Identify the person	Describe the case
---------------------	-------------------

Classify the case

Using these categories, check **ONLY** the most serious result for each case :

Enter the number of days the injured or ill worker was :

Check the "injury" column or choose one type of illness:

(A)	(B)	(C)	(D)	(E)	(F)
Case No.	Employee's Name	Job Title (e.g., Welder)	Date of Injury or onset of illness (mo./day)	Where the event occurred (e.g. Loading dock north end)	Describe injury or illness, parts of body affected, and object/sub

Death	Days away from	Remained at work		On job transfer or restriction (days)	Away from work (days)	Injury	(M)	Skin Disorder	Respiratory Condition	Poisoning	All other illnesses
(G)	(H)	(I)	(J)	(K)	(L)	(1)		(2)	(3)	(4)	(5)

Page totals	0	- 0	.. 0 ..	0	0 ..	0 ..	0	0	0	0	0
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Be sure to transfer these totals to the Summary page before you post it.

NERC's Forms				Year												
<i>All establishments must complete this Summary page, even if no injuries or illnesses occurred during the year. Remember to review the</i>																
<i>Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from</i>				Establishment Information												
<i>Employees former employees, and their representatives have the right to review the NERC Form in its entirety.</i>				Your Establishment Name												
Number of Cases				Street												
				City												
				Brief Description of Facility												
Total number of deaths		Total number of cases with days away from work	Total number of cases with job transfer or restriction	Total number of other recordable cases	<div style="border: 1px solid black; height: 100px; width: 100%;"></div>											
0		0	0	0												
(G)		(H)	(I)	(J)												
Number of Days					Employment Information											

Total number of days of job transfer or restriction		Total number of days away from work		Annual average number of employees	
0		0		Total hours worked by all employees last year	
(K)		(L)			
Injury and Illness Types				Sign here	
Total number of				Knowingly falsifying this document may result in a fine.	
(M)					
(1) Injury		0	(4) Poisoning	0	I certify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and complete.
(2) Skin Disorder		0	(5) All other illnesses	0	
(3) Respiratory Condition		0			
				Company Executive	
				Title	
Post this Summary page from February 1 to April 30 of the year following the year covered by the form.				Phone	
				Date	

NERC's Form				Attention: This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.	
Injuries and Illnesses Incident Report					
		Information about the employee		Information about the case	
This Injury and Illness Incident Report is one of the first forms you must fill out when a recordable work related injury or illness has occurred.	1)	Full Name		9)	Case number from the Log (Transfer the case number from the Log after you record the case.)
	2)	Street		10)	Date of injury or illness
		City	State	11)	Time employee began work AM/PM
	3)	Date of birth		12)	Time of event AM/PM Check if time cannot be determined
	4)	Date hired		13)	What was the employee doing just before the incident occurred? Describe the activity, as well as the tools, equipment or material the employee was using.
Within 7 calendar days after you receive information that a recordable workrelated injury or illness has occurred, you must fill out this form or an equivalent.	5)	Male		14)	What happened? Tell us how the injury occurred. Example: "When ladder slipped on wet floor, worker fell 20 feet";
		Female			
		Information about the physician or other health care professional			
	6)	Name of physician or other health care professional			
If you need additional copies of this form, you may photocopy and use as many as you need.	7)	If treatment was given away from the worksite, where was it given?			
		Facility		15)	What was the injury or illness? Tell us the part of the body that was affected and how it was affected; be more specific than "hurt", "pain", or "sore." Examples: "strained back"; "chemical burn, hand"; "carpal tunnel syndrome."
		Street			
		City	State		
	8)	Was employee treated in an emergency room?			

TWENTY-SECOND SCHEDULE—continued

regulation 2(r)

Completed by				Yes		17)	What object or substance directly harmed the employee? Examples: "concrete floor"; "chlorine"; "radial arm saw." If this question does not apply to the incident, leave it blank.
				No			
Title							
Phone		Date		8) Was employee hospitalized overnight as an in-patient?		18)	If the employee died, when did death occur? Date of death
				Yes			
				No			

B 680

TWENTY-THIRD SCHEDULE—continued

regulation 2(s)

4	ELECTRICAL EQUIPMENT	Total	Good	Bad	Yes	No	High	Low	Remarks
	Check the condition of the following:								
	Circuit Breakers :								
a	Rating :								
b	Remote Control								
c	Serviceability and labelling								
d	Security/Safety and storage								
e	Accessibility								
f	Safety interlock								
	Insulator :								
g	Burning on insulators								
h	Breakage								
	Earthing Switches :								
i	Condition								
j	Availability on Switchgears/Transformers								
	POWER SYSTEM PROTECTION :								
	Check the condition of the following :								
k	Line/Distance Protection Relay response to faults								
l	Calibration/Relay response to faults								
m	Relay co-ordination with other relays								
n	Number of Protection Type								
	EARTHING/GROUNDING :								
	Check the condition of the following :								
o	Type of Grounding (Indicate Type)								
p	Earthing Integrity								
q	Condition of Grounding equipment								
	Periodic Testing of Earth Resistance								
	OVERHEAD LINES AND STRUCTURAL SUPPORTS :								
r	Number of Overhead Poles								
s	Towers Erection								
t	Line Stringing (in Kilometers)								
u	Insulators and another line fittings								
v	Jumpers								
w	Fuses								
x	Towers Support Structures :								
s/n	Area of Inspection	Good	Bad	Yes	No	High	Low	N/A	Remarks
5	PERSONAL PROTECTIVE EQUIPMENT :								
	Check the availability, adequacy and condition of the following:								
a	Eye protection PPE								
b	Hearing Protection								
c	Face shields								
d	Protection clothing								
e	Safety shoes, glasses, gloves								
f	Respirators accessibility & serviceability								
g	Safety Installation (deluge shower, eye wash station)								
6	MACHINERY								
	Check the state of the following:								
a	Are authorized staff trained to use, clean and operate machinery?								
b	Are machinery adequately guarded?								
c	Operating controls protected from inadvertent operation?								
d	Are machinery clearly marked?								
e	Hazard area clearly defined and secured?								
f	Flying object protection								
g	Period maintenance records								
h	Safety notices clearly displayed								
i	Competence of operators								
j	Emergency safety switch accessible								
k	User manual available								
l	Are there quality lockout / tag-outs cards?								
7	STORAGE AREAS	Good	Bad	Yes	No	High	Low	N/A	Remarks
	Check the following conditions:								
a	Accessibility								
b	Condition of shelves and cupboards								
c	Condition of lifting and stacking aids								
d	Ventilation and cleanliness								
e	Lighting in storage areas								

(For Licensee's Internal Use)

NERC Standard Programs and Processes	Title : Report, Investigate and Classify Injuries and Illnesses	NERC Standard
		Effective Date :
<p>Location :</p> <p>Description :</p> <p>Responsible Peer Team : <u>Safety Process Ownership Team</u> Responsible Peer Team</p> <p>Team Members :</p>		
CONCURRENCES		
<div style="display: flex; justify-content: space-between; margin-top: 100px;"> <div data-bbox="57 1221 449 1263">_____ CEO</div> <div data-bbox="925 1221 1237 1263">_____ Date</div> </div>		
APPROVAL		
<div style="display: flex; justify-content: space-between; margin-top: 100px;"> <div data-bbox="57 1619 449 1661">_____ CEO</div> <div data-bbox="925 1619 1237 1661">_____ Date</div> </div>		

TWENTY-FIFTH SCHEDULE

regulation 2(t)

(For Licensee's Internal Use)

NERC Standard Programs and Processes	Title : Conduct Workplace Regulatory Compliance Inspections	NERC Standard
		Effective Date :
<p>Location :</p> <p>Description :</p> <p>Responsible Peer Team : <u>Disco Safety Program Process Improvement</u> Responsible Peer Team</p> <p>Team Members :</p>		
CONCURRENCES		
<p>_____</p> <p>CEO Date</p>		
APPROVAL		
<p>_____</p> <p>CEO Date</p>		

HAZARD ABATEMENT PLAN			
Abatement Plan Issue Date :			
Plant/Site :	Date of Inspection :	Inspector :	Item No.
Hazard :			
Reason Hazard Cannot be Corrected Within 30 Days :			
Proposed Corrective Action and Abatement Date:			
Interim Measures to Protect Employees:			
TEAM MEMBERS			

TWENTY-SEVENTH SCHEDULE

regulation 2(t)

NOTICE OF INJURY/ILLNESS

Case Number				
From the Log:				
Information about the Employee				
Full Name of Injured (Last, First, MI):			Employee ID	
Street Address	City	State:	Zip:	
Disco Employee <input type="checkbox"/>	Augmented Employee <input type="checkbox"/>	Job classification:		
Date of Birth:	Date Injured:	Male <input type="checkbox"/>	Female <input type="checkbox"/>	
Information about the Physician or other Health Care Provider				
Name of physician or other Health Care Professionals:				
If treatment was given away from the worksite, where was it given?				
Facility:				
Street:	City:	State:	Zip:	
Was employee treated in an emergency room? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Information About The Case				
Date of Injury:	Time of Injury:	Date of Notice:	Time employee began work:	10 Digit Org Code:
Severity of injury/illness: select	Injury /illness Type: Select	Nature of Injury: select	Body part Injured: Select	
What was the employee doing just before the incident occurred?				
What happened?				
What was the injury or illness?				
What object or substance directly harmed the employee?				
If the employee died, when did the death occur?:				
Completed by:	Title:	Phone	Date:	

Requirement for Environment is not in any Standard Format or Template, and so has to be developed in a Professional and Presentable manner by the Licensee.

YEARLY FORECAST REPORTING TEMPLATE FOR MARKET OPERATOR

	2009	2010	2011	2012	2013
CAPITAL EXPENDITURE					
Furniture/Office Equipments					
Land and Buildings					
Motor Vehicles					
Computers					
Other Machineries					
RECURRENT EXPENDITURE					
Salary					
Administrative Expenses					
Pension					
Office Rentage					
Medical Bill					
Computer Consumables					
Maintenance					
Training					
Information Technology					
Capacity available from Generators					
Total Energy Received by the Discos					
Energy Injected into the Grip					
Energy Extracted from the Grid					
Total Sales at the Wholesale Market					
Administration of the Present PPA'S					
Revenue Collection of the Discos					
Distribution of Revenue Collected from the Discos					
Subsidy Received for the Government					
Subsidy Distribution					
Transmission Losses					
No of Unmetered Points					
No of Trading Points to be Metered					
Gas Consumption as against Energy Generated					

MONTHLY FORECAST EXPENDITURE REPORTING TEMPLATE FOR GENERATION COMPANIES

	Jan	Feb	Mar	April	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec
ACTUALS												
CAPITAL EXPENDITURE												
Governor												
Operating Expenses												
Reactive Power												
Frequency Response												
IT Equipments												
Health and Safety												
IT Equipments												
Turbines/Generators												
Furniture/Office Equipments												
Land and building												
Ancillary Services												
Motor Vehicles												
Spare Parts												
Other Machineries												
RECURRENT EXPENDITURE												
Fuel												
Salary												
Administration												
Pensions and Gratuity												
Computer Consumables												
Maintenance												
Training												
Interest Expense												
SOURCE OF FUNDING												
Government Subsidy												
Other Expected Income												
Revenue from the Sales of Electricity												
WORK IN PROGRESS												
Capital Investment for the Project												
Level of Work Done												
Proposed Date of Completion												
Certificate of Completion												
MWS of Electricity Generated												
MWS of Electricity Sent Out												

YEARLY FORECAST EXPENDITURE REPORTING TEMPLATE FOR GENERATION COMPANIES

	2009	2010	2011	2012	2013
GENERATOR SUBSTATION					
CAPITAL EXPENDITURE					
Governor					
Operating Expenses					
Reactive Power					
Frequency Response					
IT Equipments					
Health and Safety					
IT equipments					
Generator					
Turbines					
Furniture/Office Equipments					
Land and Buildings					
Ancillary Services					
Motor Vehicles					
Spare Parts					
Other Machineries					
RECURRENT EXPENDITURE					
Fuel					
Salary					
Administration					
Pension and Gratuity					
Computer Consumables					
Maintenance					
Training					
Interest Expense					
No. of Staff					
SOURCE OF FUNDING					
Government Subsidy					
Other Expected Income					
Revenue from the Sales of Electricity					
WORK IN PROGRESS					
Capital Investment for the Project					
Level of Work Done					
Proposed Date of Completion					
Certificate of Completion					

MONTHLY MARKET SETTLEMENT STATEMENT TEMPLATE FOR GENERATION COMPANIES

NAME OF GENERATION COMPANY

REPORTING MONTH : _____

S/No.	Description	Amount		Remarks
		Previous Month	Current Month	
1.	Total Energy Generated			In kWh
2.	Total Energy Internally Used			In kWh
3.	Total Energy Sent Out			In kWh
4.	Amount Invoiced :			
5.	Capacity Charge @ NX/MW			Specify Applicable MW
6.	Energy Charge @ NX/mWh			Row 3 multiplied by Row Energy Charge per mWh
7.	Total Invoice Amount			Row 5 plus Row 6
8.	Amount Received from the DISCO			Specify amount received from DISCO if any
9.	Amount Received from the M/O			Specify amount received from DISCO if any
10.	Any other Receipts			e.g, Income from investments, interests, etc.
11.	Total GENCO Revenue			Addition of Rows 8, 9 and 10
12.	Add Beginning Balance			Same as closing balance of previous month
13.	Total Funds Available			Column 11 plus Column 12
14.	Applied as follows :			
15.	CAPEX			Total of all Capital Expenditure
16.	OPEX			Total of all Operating Expenses (salaries, maintenance, etc)
17.	Others			Please specify type of other expenditure here
18.	Closing Balance			Row 13 minus Rows 15, 16 and 17

Reporting Requirements for Transmission Licensees

FOURTH SCHEDULE	:	Required Data for Computation of Key Performance indicators for Transmission Companies
FIFTH SCHEDULE	:	Transmission Equipment Reporting on Conditions of Transformers
SIXTH SCHEDULE	:	Transmission Equipment Reporting on Conditions of Circuit Breakers
SEVENTH SCHEDULE	:	Transmission Equipment Reporting on Conditions of Reactors
EIGHTH SCHEDULE	:	Transmission Equipment Reporting on Conditions of Ground Switches
NINTH SCHEDULE	:	Transmission Equipment Reporting on Conditions of 132kV Transmission Lines
TENTH SCHEDULE	:	Transmission Equipment Reporting on Conditions of 330kV Transmission Lines
ELEVENTH SCHEDULE	:	Transmission Equipment Reporting on Conditions of Isolators
TWELFTH SCHEDULE	:	Transmission Equipment Reporting on Conditions of Communication/SCADA
** SCHEDULE 3J	:	Monthly Forecast Reporting Template for Market Operator ***
TWENTY-EIGHTH SCHEDULE	:	Yearly Forecast Reporting Template for Market Operator
TWENTY-NINTH SCHEDULE	:	Monthly Forecast Expenditure Reporting Template for Generation Companies
TWENTY-FOURTH SCHEDULE	:	Monthly Disbursement Summary Template for Market Operator
THIRTY-SIXTH SCHEDULE	:	Reporting Template for Trading – Monthly Reporting Format
THIRTY-SEVENTH SCHEDULE	:	Reporting Requirement for Electricity Trading Annual Report

Connection Agreements, Investment and Revenue Requirements, Charges for Connection, Transmission Master Plan and Capacity, Operational Planning and Central Dispatch, System Operation Budget and Charges, Settlement System, Market Operation Budget and Charge, Market Operations: Development and Compliance with Market Rules, Environment are not in any Standard Format or Template, and so have to be developed in Professional and Presentable manner by the Licensee.

MONTHLY FORECAST EXPENDITURE REPORTING TEMPLATE FOR DISTRIBUTION COMPANIES

REQUIREMENTS : *Actual Expenditure*

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Capital Expenditure Estimates :												
Land and Buildings												
Distribution Equipments												
Transformers												
Feeder Pillars												
Cables												
Others (specify)												
Operational Vehicles												
Meters and Instruments												
PPM												
MD Meters												
Digital Meters												
Others (specify)												
Information Technology												
TOTAL :												
Recurrent Expenditure Estimates :												
Salary and Wages												
Repairs and Maintenance												
Billing and Collection expenses												
Capacity building												
Staff Welfare												
Admin Expenses												
Health and Safety												
Pension and Gratuity												
Bank Charges												
Consumer Service Expenses												
Taxation												
TOTAL :												
Source of Funds :												
Internally Generated Revenue												
MYTO Subsidy												
Others (specify):												
TOTAL :												
Indicate Number of Employees:												
Energy received :												
Productivity in (kwh/staff)												
Productivity in (Naira/staff)												

YEARLY FORECAST EXPENDITURE REPORTING TEMPLATE FOR DISTRIBUTION COMPANIES

REQUIREMENTS :

	2009	2010	2011	2012	2013
<i>Capital Expenditure Estimates:</i>					
Land and Buildings					
Distribution Equipments					
Transformers					
Feeder Pillars					
Cables					
Others (specify)					
Operational Vehicles					
Meters and Instruments					
PPM					
MD Meters					
Digital Meters					
Others (specify)					
Information Technology					
TOTAL :					
<i>Recurrent Expenditure Estimates:</i>					
Salary and Wages					
Repairs and Maintenance					
Billing and Collection expenses					
Capacity building					
Staff Welfare					
Admin Expenses					
Health and Safety					
Pension and Gratuity					
Bank Charges					
Consumer Service Expenses					
Taxation					
TOTAL :					
<i>Source of Funds :</i>					
Internally Generated Revenue					
MYTO Subsidy					
Others (specify) :					
TOTAL :					
Indicate Number of Employees:					
Energy received :					
Productivity in (kwh/staff)					
Productivity in (Naira/staff)					

MONTHLY DISBURSEMENT SUMMARY TEMPLATE FOR MARKET OPERATOR

REPORTING MONTH :

S/No.	Description	Date of Payment	Total	Abuja	Benin	Eko	Enugu	Ibadan	Ikeja	Jos	Kaduna	Kano	Port Harcourt	Yola	Remark
	Actual Revenues :														
	Opening Balance of Market Settlement Accounts														
	Actual Revenue Collected by DISCOs														
	MYTO Subsidy paid to M/O by CBN														
1.	Total Revenue														
	Disbursed as follows:														
2.	Distribution Companies														
	Amount Retained by DISCOs from IGR														
	Amount paid to DISCOs from subsidy														
	Total Amount Paid to DISCOS														
3.	Amount paid for Fuel (Gas)														
4.	Amount paid to GENCOs														
	Egbin														
	Shiroro														
	Kainji														
	etc.														
	Total Paid to GENCOs														
5.	Amount paid to IPPS														
	Shell														
	Agip Okpai														
	AES														
	ETC														
	Total Paid to IPPS														
6.	Amount paid to TCN														
7.	Amount paid to NERC														
8.	Amount paid to PHCN CHQ														
9.	Other Deductions														
	(a)														
	(b)														
	(u)														
	Total other payments														
10.	Total Disbursement														
11.	Closing Balance (Row 1 minus Row 10)														

Pls specify date of payment for payments made to each beneficiary in the Third Column.

MONTHLY MARKET SETTLEMENT STATEMENT TEMPLATE FOR DISTRIBUTION COMPANIES

NAME OF DISTRIBUTION COMPANY

REPORTING MONTH : _____

S/No.	Description	Amount		Remarks
		Previous Month	Current Month	
1.	Total Energy Received			In kWh
2.	Total Revenue Collected			Internally Generated Revenue in Naira
3.	Any Other Receipts			Indicate details and attach breakdown where necessary
4.	Total Internally Generated Revenue			Row 2 plus Row 3
5.	Less Amount paid to Market Operator			Indicate date of payment for the current month here
6.	Less Amount paid to IPPS if any			Indicate date of payment for the current month here
7.	Amount Retained by the Disco			Row 4 minus Rows 5 and 6
8.	Add MYTO Subsidy Received from the M/O			Indicate date of receipt in current month here
9.	Add other Receipts from the M/O			Indicate type and date of receipt in current month here
10.	Total Disco Revenue in the month			Row 7 plus Rows 8 and 9
11.	Add Beginning Balance			Equal to Closing Balance of previous month
12.	Total Available Funds in the month			Row 10 plus Row 11
13.	Applied as follows :			
14.	CAPEX			Total of all Capital Expenditure
15.	OPEX			Total of all Operating Expenses (salaries maintenance etc)
16.	Others			Please specify type of Other Expenditure here
17.	Closing Balance			Row 12 minus Rows 14, 15 and 16

THIRTY-SIXTH SCHEDULE

regulation 3(g)

REPORTING TEMPLATE FOR TRADING MONTHLY REPORTING FORMAT

REQUIREMENTS : *Actual Expenditure*

Year:.....

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
<i>Capital Expenditure Estimates :</i>												
Land and Buildings												
Furniture/Office Equipments												
Computers												
Operational Vehicles												
Others (specify)												
Information Technology												
TOTAL :												
<i>Recurrent Expenditure Estimates :</i>												
Salary and Wages												
Repairs and Maintenance												
Billing and Collection Expenses												
Capacity Building												
Staff Welfare												
Admin. Expenses												
Health and Safety												
Pension and Gratuity												
Bank Charges												
Consumer Service Expenses												
Taxation												

[illegible]

THIRTY-SEVENTH SCHEDULE
REPORTING REQUIREMENT FOR
ELECTRICITY TRADING ANNUAL REPORT

REQUIREMENTS :

	2009	2010	2011	2012	2013
<i>Capital Expenditure Estimates</i>					
Land and Buildings					
Furniture/Office Equipments					
Computers					
Operational Vehicles					
Others (specify)					
Information Technology					
TOTAL :					
<i>Recurrent Expenditure Estimates :</i>					
Salary and Wages					
Repairs and Maintenance					
Billing and Collection expenses					
Capacity Building					
Staff Welfare					
Admin. Expenses					
Health and Safety					
Pension and Gratuity					
Bank Charges					
Consumer Service Expenses					
Taxation					
TOTAL :					
<i>Source of Funds :</i>					
Internally Generated Revenue					
Others (specify):					
TOTAL :					
Volume of Trading in KW/H					
Purchased from :					
Sold to :					
Point of Purchase :					
Purchase Price :					
Point of Sale :					
Sale Price :					
Transmission Loss :					
Trading Margin :					
Indicate Number of Employees :					
Energy Received :					
Productivity in (kwh/staff)					
Productivity in (Naira/staff)					

700

[illegible]

DISTRIBUTION COMPANY CUSTOMER COMPLAINTS REGISTER

S/No.	Customer Details (Name/Address) Tel./Email	The Grievance/ Complaint/ Others	Complaints No./Date of Receipt	Complaints Business Unit	Action Taken/Date	Month	Year
						Resolution	Remarks

MONTHLY FORECAST REPORTING TEMPLATE FOR MARKET OPERATOR

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	Jan	Feb	Mar	Apr	May	Jun	Jul
CAPITAL EXPENDITURE							
Furniture/Office Equipments							
Land and Buildings							
Motor Vehicles							
Computers							
Other Machineries							
RECURRENT EXPENDITURE							
Salary							
Administrative Expenses							
Pension							
Office Rentage							
Medical Bill							
Computer Consumables							
Maintenance							
Training							
Information Technology							
Capacity Available from Generators							
Total Energy Received by the DISCOs							
Energy Injected into the Grid							
Energy Extracted from the Grid							
Total Sales at the Wholesale Market							
Administration of the Present PPA's							
Revenue Collection of the DISCOS							
Distribution of Revenue Collected from the DISCOS							
Subsidy Received for the Government							
Subsidy Distribution							
Technical Losses							
Non-Technical Losses							
Number of Unmetered Points							
Number of Trading Points to be Metered							
Gas Consumption as against Energy Generated							

REPORTING TEMPLATE FOR TRANSMISSION FORECAST EXPENDITURE

CAPITAL EXPENDITURE ESTIMATES :	2009	2010	2011	2012	2013	2014	2015	2016
Land and Way leave								
Buildings								
Substation Equipments								
Overhead and Underground lines and associated equipments								
Vehicles								
Aircrafts								
Information Technology								
Work in Progress								
Materials in Stores								
Stationeries								
Loose Tools								
Instruments and Gauges								
<i>Sub-Total</i>								
RECURRENT EXPENDITURE ESTIMATES								
Salaries and Salary-related Costs								
General Expenses i.e. stationeries, entertainment								
Repairs and maintenance of vehicles								
Repairs and maintenance of buildings - offices								
Repairs and maintenance of buildings - operations								
Repairs and maintenance of substations and substations equipments								
Repairs and maintenance of communication equipments								
Repairs and maintenance of lines								
Repairs and maintenance of office equipments								
Transportation and travelling								
Capacity building								
State welfare								
Health and Safety								
Pension and Gratuity								
Bank Charges								
<i>Sub-Total</i>								
SOURCES OF FUNDS								
Internally generated revenue								
MYTO Subsidy								
Others (specify)								
<i>Sub-Total</i>								
Indicate number of employees :								
Energy wheeled:								
Productivity in KWH/Staff								
Productivity in Naira/Staff								

704

[illegible]

REPORTING TEMPLATE FOR TRANSMISSION ACTUAL EXPENDITURE—*continued*

Health and Safety													
Pension and Gratuity													
Bank Charges													
<i>Sub-Total</i>													
SOURCES OF FUNDS													
Internally generated revenue													
MYTO Subsidy													
Others (specify)													
<i>Sub-Total</i>													
Indicate number of employees :													
Energy wheeled:													
Productivity in KWH/Staff													
Productivity in Naira/Staff													

TRANSMISSION SETTLEMENT STATEMENT

TRANSMISSION REPORTING MONTH :

S/No.	Description	Amount		Remarks
		Previous Month	Current Month	
1.	Total Energy Received			
2.	Total Energy Wheeled			
3.	Total Energy Lost			
4.	Percentage of Energy Lost			
5.	Amount received from the Market Operator			
6.	Any Other Receipts			
	(a) From Market Operator			
	(b) From External Sources			
	(c) *FGN			
	(d) *Commercial Activities			
7.	Total Transmission Receipts			
8.	Total Funds Available			
	Applied as follows :			
9.	CAPEX			
10.	OPEX			
11.	Others			
12.	Closing Balance			

Reporting Requirements for Distribution Licensees

SCHEDULE 4A :	Required Data for Computation of Key Performance indicators for Electricity Distribution Companies
SCHEDULE 4B :	Six-Monthly Report on Derogation Requests by Electricity Distribution Companies
SCHEDULE 4C :	Six-Monthly Report on Approved Derogation by Electricity Distribution Companies
SCHEDULE 4D :	Register of Approved Distribution Code Derogations
SCHEDULE 4E :	Distribution Load Shedding Plan
SCHEDULE 4F :	5-Year Demand Forecast
SCHEDULE 4G :	5-Year Distribution Plan
SCHEDULE 4H :	Monthly Forecast Expenditure Reporting Template for Distribution Companies
SCHEDULE 4I :	Yearly Forecast Expenditure Reporting Template for Distribution Companies
SCHEDULE 4J :	Monthly Market Settlement Statement Template for Distribution Companies
SCHEDULE 4K :	Monthly Complaints Report Template for Distribution Companies
SCHEDULE 4L :	Customer Complaints register Template for Distribution Companies

For Licensee's Internal Use)

NERC Standard Programs and Processes	Title : Conduct Serious Accident Investigation	NERC Standard
		Effective Date :

Location :

Description :

Responsible Peer Team : Safety Process Ownership Team
Responsible Peer Team

Team Members :

CONCURRENCES

CEO

Date

APPROVAL

CEO

Date

FORTY-FIFTH SCHEDULE

B 709
regulation 2(t)

ENVIRONMENTAL HEALTH AND SAFETY CONFINED SPACE ENTRY PERMIT		
Permit Number		Date
Location and Description of Confined Space :		
Purpose of Entry :		
Scheduled a.m.		Scheduled a.m. .
Start p.m.		Finish p.m.
Day / Date / Time Day / Date / Time		
Employee(s) in Charge of Entry:		
Entrants:		
Attendants:		
Pre-Entry		
Authorization:		
(Check those items below which are applicable to your confined space permit)		
TYPES OF HAZARDS		
Oxygen - Deficient Atmosphere	Engulfment	Energized Electrical Equipment
Oxygen - Enriched Atmosphere	Toxic Atmosphere	Entrapment
Welding/Cutting	Flammable Atmosphere	Hazardous Chemical.
Note: Check appropriate hazard.		
SAFETY PRECAUTIONS		
Self-Contained	Protective Gloves	Barricade Job Area
Breathing Apparatus	Lifelines	Signs Posted
Air - Line Respirator	Respirators	Clearances Secured
Fire - Retardant Clothing	Lockout/Tagout	Lighting
Ventilation	Fire Extinguishers	Ground Fault Interrupter
Remarks:		
Note: Check appropriate hazard.		
ENVIRONMENTAL CONDITIONS		
Tests To Be Taken		
Date / Time :		
Oxygen: % a/p :		
Lower Explosive Limit : %		
Toxic Atmosphere :		
Instruments Used :		
Re-Testing Date/Time :		
Oxygen: % a/p :		
Lower Explosive Limit : %		
Toxic Atmosphere:		
Instruments Used:		
Employee Conducting Safety Checks :		
SIGNATURE :		
Remark on the Overall Condition of the Confined Space :		
Entry Authorization :		
All actions and/or conditions for safe entry have been performed :		
Person in Charge of Entry :		
Entry Cancellation :		
Entry has been completed and all entrants have Exited Permit Space :		
Person in Charge of Entry :		
In Case of Emergency Call :		

MADE at Abuja this 26th day of July, 2012.

DR SAM AMADI,
Chairman/Chief Executive Officer
Nigerian Electricity Regulatory Commission.