**Tender Response Form C1**

**Multiple Provider Frequency Keeping**

Please fill out all boxes below, and the tenderer’s name in the header of every page.

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| Details of capability |
| FK Site | Control Min (MW) | Control Max (MW) | MW Band Constraints |
|  |  |  |  |
|  |  |  |  |

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| --- |
| Contact details of two personnel entitled to submit, revise and cancel offers |
| FK Site | Name and designation | Hours available | Telephone number | Mobile number |
|  |  |  |  |  |
|  |  |  |  |  |

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| --- |
| Contact details of personnel capable of carrying out Dispatch Instructions |
| FK Site | Name and designation | Hours available | Telephone number | Mobile number |
|  |  |  |  |  |

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| Details of Dispensations affecting relevant Performance Standards |
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| Term being tendered for (months) |
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