ATTACHMENT Y

Notification of Generation Resource/SCU/Pseudo-tied Out Generator

Change of Status,

Including Notification of Rescission

This is a notification of change of status of a Generation Resource, Synchronous Condenser Unit					
("SCU"), or Pseudo-tied out Generator in accordance with Section 38.2.7.a of the Tariff. An					
electronic copy of the completed form will be accepted by the Transmission Provider, however, a					
form will not be considered complete until the original form containing an original signature,					
including all attachments, is received by the Transmission Provider at the following address:					
MISO, Attention: Director Resource Utilization; 720 City Center Drive, Carmel, IN 46032.					
The Transmission Provider may request additional information as reasonably necessary to					
support operations under the Tariff.					
Owner of the Generation Resource, SCU or Pseudo-tied out Generator:					
Name of Market Participant:					
Owner's state of organization or incorporation					
Generation Resource/SCU/Pseudo-tied Out Generator [plant and unit number(s)]					
Source/Identification of Generation Interconnection Service [name of agreement, parties, date,					
date filed and docket number, and any other information to identify an agreement]					

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Pursu	ant to the term	s of the MISO Tarif	f, Owner hereby certifi	es that it will			
[]	Suspend for economic reasons operation of all or a portion of the Generation Resource/SCU/Pseudo-tied out Generator commencing on [day] of [month] of [year]						
[]	Rescind the current notice to SuspendThe facility is further described as follows:						
Locat	tion:						
Unit Name		CPNode (if applicable)	Nameplate Capacity(MW)	Change in Capacity(MW)			
38.2.7 Provident The unique Resource	7 of the Transn der except as p undersigned cer urce/SCU/Pseu	nission Provider's Ta provided for under So rtifies that he or she ado-tied out Generate	riff and will not be matection 38.2.7 of the Tartis an officer of the own	er of the Generation norized to execute and submit			
Signa	ıture						
Name:				Contact Information			
Title:							
Date:							
	ГЕ OF						
COU	NTY OF						

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Before me, the undersigned authority, this	, known by me	
to be the person whose name is subscribed	d to the foregoing instrument, who	, after first being
sworn by me deposed and said:		
"I am an officer of	_, I am authorized to execute and s	submit the foregoing
notification on behalf of	, and the statements containe	d in such application
are true and correct."		
SWORN TO AND SUBSCRIBED TO BI	EFORE ME, the undersigned author	ority on this the
, day of, 20		
	Notary Public, State of	
	My Commission expires	