Application to be an approved auditor

|  |  |
| --- | --- |
| **Name of organisation:** |  |
| **Applicant name:** |  |

|  |  |
| --- | --- |
| **Address:** |  |
| **Phone number:**  |  |
| **Email:** |  |

Please address your application and any related communication to:

Electricity Authority

PO Box 10041

Wellington

NEW ZEALAND

Attention: Market Administrator

Phone: + 64 4 460 8860

Facsimile: + 64 4 460 8879

Email: marketoperations@ea.govt.nz

**CHECKLIST**

*Before sending your application, please ensure that you have completed and attached the following:*

* Cover Letter;
* Curriculum Vitae;
* 2 written references;
* Appendix One: Application for Accreditation as an Approved Auditor; and
* Appendix Two: Certification Statement.

#### Activities for which approval is sought: (please tick appropriate box)

|  |
| --- |
| **Test House Audits** |
|  | Class A & B Test Houses. |
| **Distributor**  |
|  | Registry obligations. |
|  | Creation and maintenance of loss factors. |
| **Reconciliation participants** |
|  | Maintaining registry information and performing customer and embedded generator switching.  |
|  | Gathering and storing raw meter data.  |
|  | Creation and management (including validating, estimating, storing, correcting and archiving) of volume information. |
|  | Calculation of ICP days. |
|  | Provision of submission information for reconciliation.  |
|  | Provision of metering information to the pricing manager in accordance with subpart 4 of Part 13 of the Code.  |
| **Metering equipment providers** |
|  | ICP & NSP Metering Equipment Providers |
| **Dispatchable load purchaser** |
|  | Collection, calculation and provision of dispatchable load information.  |

Reconciliation Participant Audits - Maintaining registry information and performing customer switching and embedded generator switching.

|  |  |
| --- | --- |
| Describe in your own words the requirements of this function. |  |
| Provide details of the roles you have held that involve this function. |  |
| Provide details of the databases and systems you have been involved in with regard to this function. |  |
| Provide other information to support your application. |  |

Reconciliation Participant Audits - Gathering and storing raw meter data.

|  |  |
| --- | --- |
| Describe in your own words the requirements of this function. |  |
| Provide details of the roles you have held that involve this function. |  |
| Provide details of the databases and systems you have been involved in with regard to this function. |  |
| Provide other information to support your application. |  |

Reconciliation Participant Audits - Creation and management (including validating, estimating, storing, correcting and archiving) of volume information.

|  |  |
| --- | --- |
| Describe in your own words the requirements of this function. |  |
| Provide details of the roles you have held that involve this function. |  |
| Provide details of the databases and systems you have been involved in with regard to this function. |  |
| Provide other information to support your application. |  |

Reconciliation Participant Audits - Calculation of ICP days.

|  |  |
| --- | --- |
| Describe in your own words the requirements of this function. |  |
| Provide details of the roles you have held that involve this function. |  |
| Provide details of the databases and systems you have been involved in with regard to this function. |  |
| Provide other information to support your application. |  |

Reconciliation Participant Audits - Provision of submission information for reconciliation.

|  |  |
| --- | --- |
| Describe in your own words the requirements of this function. |  |
| Provide details of the roles you have held that involve this function. |  |
| Provide details of the databases and systems you have been involved in with regard to this function. |  |
| Provide other information to support your application. |  |

Reconciliation Participant Audits - Provision of submission information to the pricing manager in accordance with subpart 4 of Part 13 of the Code.

|  |  |
| --- | --- |
| Describe in your own words the requirements of this function. |  |
| Provide details of the roles you have held that involve this function. |  |
| Provide details of the databases and systems you have been involved in with regard to this function. |  |
| Provide other information to support your application. |  |

Distributor Audits - Registry obligations.

|  |  |
| --- | --- |
| Describe in your own words the requirements of this function. |  |
| Provide details of the roles you have held that involve this function. |  |
| Provide details of the databases and systems you have been involved in with regard to this function. |  |
| Provide other information to support your application. |  |

Distributor Audits - Calculation of loss factors and use of loss factors for reconciliation purposes.

|  |  |
| --- | --- |
| Describe in your own words the requirements of this function. |  |
| Provide details of the roles you have held that involve this function. |  |
| Provide details of the databases and systems you have been involved in with regard to this function. |  |
| Provide other information to support your application. |  |

ICP & NSP Metering Equipment Provider Audits

|  |  |
| --- | --- |
| Describe in your own words the requirements of this function. |  |
| Provide details of the roles you have held that involve this function. |  |
| Provide details of the databases and systems you have been involved in with regard to this function. |  |
| Provide other information to support your application. |  |

Class A Test House and Class B Test House Audits

|  |  |
| --- | --- |
| Describe in your own words the requirements of this function. |  |
| Provide details of the roles you have held that involve this function. |  |
| Provide details of the technical training you have received with regard to this function. |  |
| Provide other information to support your application. |  |

Dispatchable Load Purchaser Audits - Collection, calculation and provision of dispatchable load information.

|  |  |
| --- | --- |
| Describe in your own words the requirements of this function. |  |
| Provide details of the roles you have held that involve this function. |  |
| Provide details of the databases and systems you have been involved in with regard to this function. |  |
| Provide other information to support your application. |  |

1. Application statement

Information and confidentiality

* 1. In the course of the application and approval process and subsequent auditor management process, the Approving Body will necessarily gather and store personal information regarding applicants. Applicants understand that the Approving Body will need to use the personal information it collects for a range of purposes connected with auditor approval, management, and removal process. By submitting an application to the Approving Body, applicants authorise the use of their personal information for these purposes and the disclosure of that information to the Authority and others involved in the approval process including the Selection Panel. If applicants do not provide this information it will be likely to negatively affect their application. Under the Privacy Act 1993, applicants have a right of access to any personal information held by the Approving Body or any others involved in the selection process. Applicants also have a right to request that any such information be corrected.
	2. Applicants should note that once an application is made to the Authority, its content will be subject to the Official Information Act 1982 (OIA). If the Authority receives a request under the OIA for the release of information contained in an application, it will be required to consider the request in terms of the criteria set out in the OIA. This would be done in consultation with the applicant concerned.
	3. Subject to the Authority's obligations under the OIA or any other law, all information the Authority receives or holds relating to an auditor’s application, performance, management, and removal will be treated as confidential. Such information will not be disclosed to a third party unless:
		+ 1. the disclosure of the information is required by law;
			2. the information is or becomes publicly available; or
			3. the auditor first consents to its disclosure.
	4. Please sign and complete the following statement and submit with your application.

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, [an authorised representative of (organisation name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,] agree to the terms and statements outlined in this application, and the Authority's Retail workstream auditor approval policy. I acknowledge that:

(a) submission of this application does not guarantee further consideration in the selection process;

(b) appointment by the relevant Approving Body to the Authority's list of approved auditors does not guarantee the purchase of any of our services;

(c) in most cases, a contract for the provision of audit services will be negotiated with the participant(s) requiring an audit under the Code, and not the Authority;

(d) if successful in my application, I will be required to agree to the Authority's terms and conditions for the appointment of approved auditors;

(e) all materials and information submitted by us and any secondary contractor to our application becomes the property of the Authority on submission.

**Name (print):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**Title:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Please do not delete this paragraph; it has a bookmark that’s required for page numbering.