



## Certification Request Form

This form should be submitted via e-mail to [Certification@mro.net](mailto:Certification@mro.net)

### Entity Information

<b>Entity Name (As Registered @ NERC):</b>		<b>Date:</b>	
<b>NERC Compliance Registry (NCR) ID:</b>			
<b>Certification Request:</b> New <input type="checkbox"/> Review <input type="checkbox"/>	BA <input type="checkbox"/> RC <input type="checkbox"/> TOP <input type="checkbox"/>		
<b>Reason for request:</b>			
<b>Date(s) Requested for On-Site Visit</b>			
<b>Coordinated Functional Registration (CFR) (related to Certified function):</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>	<b>CFR Number:</b>	
<b>Joint Registration Organization (JRO) (related to Certified function):</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>	<b>JRO Number:</b>	
<b>Multi Regional Registered Entity (MRRE):</b>	FRCC <input type="checkbox"/> MRO <input type="checkbox"/> NPCC <input type="checkbox"/> RF <input type="checkbox"/> SERC <input type="checkbox"/> Texas RE <input type="checkbox"/> WECC <input type="checkbox"/>		
<b>MRRE ID:</b>			

### Certification Contact

<b>Name:</b>		<b>Title:</b>	
<b>Contact Address:</b>		<b>City, State, Zip:</b>	
<b>Telephone:</b>		<b>E-Mail Address:</b>	

For questions about Certification and Certification reviews, please contact:  
Summer Stephens at [summer.stephens@mro.net](mailto:summer.stephens@mro.net)