

## **PJM Black Start RFP Level 1 Response**

Company Name:	
Unit Name:	Contact Name:
Unit Address:	Contact Address:
Unit Market ID:	Contact Email:
Unit ICAP:	Contact Phone:
Type of Unit (CT, CC, Steam, etc.):	
Interconnection Voltage Level:	
Inteconnected Swyd Name:	
TO Zone (if known):	
Primary Fuel:	Secondary Fuel (if applicable):
If oil fired, oil storage on site?	
If gas fired, firm gas transportation? YES NO	
Proposed black start MW:	
Unit minimum load (under current air permit):	
Emission limitations for operation below minimum (e.g. start-up tin	ne to reach air permit compliance):
For Combined Cycle (CC) Units Only	
Simple Cycle available? YES NO	
Steam bypass available? YES NO	
Percent of CT Output allowed by steam bypass:	