Irish Retail Electricity Market
Participant Questionnaire

Version: 1.0

Status: Approved

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Gemserv Limited
7th Floor Centurion House
24 Monument Street
London
EC3R 8AJ

Company Reg. No: 4419 878

Tel: +44 (0) 20 7090 1000
Fax: +44 (0) 20 7090 1001

www.gemserv.com

I Change History

Version	Status	Issue date	Reason For Change
0.1	Draft	14/08/2007	
0.2	Draft	11/12/2007	RMDS Review
0.3	Final	13/02/2009	RMDS Review
1.0	Approved	05/03/2009	Approved at IGG

II Quality Assurance

Name	Responsibility	Signature	Date
Author:			
Dinesh Sharma	Assurance Team		07/03/2006
Reviewer(s):			
Peter Varley	Assurance Team		31/07/2006
Orla Lemass	Head of Assurance		24/07/2007
Babatunde Sodeke	Assurance Team		13/02/2009
RMDS	Market Design		26/02/2009
AAG	Assurance Advisory		
IGG	Regulation		05/03/2009

Cover Sheet

The Participant completes all the information within the table below and forwards this to the RMDS in the first instance (contact details below). The Assurance Body completes the date received. The relevant section of the PQ should then be completed and submitted, as required, at each appropriate point in the Assurance process, as described in the Market Entry Assurance Process document.

Organisation Name:		**Market Participant ID:**	
Contact Name:		**Date:**	
Contact Details: **Tel:** **Fax:** **Email:**		I confirm that it is our intention to undertake the Market Entry Assurance Process for operating in the Retail Electricity Market in the following segments (*tick box(es)*): QH[1] NQH[2] (non-Domestic) NQH (Domestic) Unmetered SoLR[3]	 ☐ ☐ ☐ ☐ ☐
Target Date for entry into the Market:			
Signed: **(for Participant)**		**Date:**	

RMDS Contact Details:
Room 303
42 Merrion Square
Dublin 2

RMDS DDI: + 353-1-6692410
Email: info@rmdservice.com
Web: www.rmdservice.com

Date received by the Assurance Body: _____

[1] Quarter Hourly metered supply

[2] Non-Quarter Hourly metered supply

[3] Supplier of Last Resort

PART 1: Business Solution Assessment

#	Item to be assessed	Your Response	Evidence to support your response
1.1	Please specify from which locations the various business functions that support Irish Market requirements will be operated.		
1.2	Please detail your Retail Electricity Market (REM) programme organisation showing reporting structure and lines of communication.		
1.3	Please list the contact names, addresses and telephone numbers of key personnel identified within your REM programme organisation chart. Please identify your Single Point of Contact (SPOC) for your Market Entry project.		
1.4	Please identify the geographical location(s) at which you expect the various assurance stages to take place.		
1.5	Which version of the Market Design as published on www.rmdservice.com have you used in your REM programme?		
1.6	Please specify the architecture of your REM systems.		
1.7	Please give a reference to your mechanism for routing of in-coming messages to applications and/or procedures and how the next steps are described.		

#	Item to be assessed	Your Response	Evidence to support your response
1.8	Which version of the XML Schema (XMLS) have you used in your REM programme?		
1.9	How does your business solution check that messages received are correctly structured and contain valid values?		
1.10	How have you ensured that all of the applicable functions embodied in the Market Design are included within your processes and applications?		
1.11	How have you ensured that all of the relevant obligations are included within your processes and applications?		

PART 1: Business Solution Assessment (Performance and Management Processes)

#	Item to be assessed	Your Response	Evidence to support your response
1.12	Have you carried out an analysis of the performance (volume) requirements of your new/modified applications and business processes?		
1.13	Name the documents that define your approach to formal: • Problem Management, • Change Control, • Configuration Management, • Release Management, • Document Control, • Test Management for your REM Programme.		

PART 1: Business Solution Assessment (Facilitation of Assurance)

#	Item to be assessed	Your Response	Evidence to support your response
1.14	Please confirm that you are able to provide comprehensive evidence of your organisation's ability to comply with the Market Design to the Assurance Body in support of the various stages of the Assurance Process.		
1.15	Please confirm that, for any on-site assessments, you are able to provide suitable office facilities for the exclusive use of the Assurance Body as required during the Market Entry Assurance Process.		

PART 1: Business Solution Assessment - Statement of Readiness

An appropriate company executive must sign this declaration as a statement on behalf of your organisation that the conditions for commencement of the Market Entry Assurance Process have been met.

PARTICIPANT ORGANISATION :

DECLARATION BY COMPANY EXECUTIVE

With the exception of those items explicitly detailed below I certify, on behalf of *Organisation name** **that :**

- **the documents declared in the Participant Questionnaire, Part 1, are current and operational;**

and confirm that:

- **our answers, as set out in the Participant Questionnaire, Part 1 are complete and accurate at the time of submission;**
- **we believe that the systems and processes that we are submitting for Assurance Body Assessment (detailed within the Self-Assessment Return and the Market Design Coverage Table) cover all aspects of the applicable parts of the Market Design and have been fully reviewed to ensure their completeness and coherence;**
- **parts 2, 3 and 4 of this Participant Questionnaire will be completed and submitted to the Assurance Body as required by the Market Entry Assurance Process;**
- **any changes to information already supplied to the Assurance Body will be notified immediately in the appropriate form;**

Please detail any exceptions here :

Authorised by :

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Print Name	**Signature**	**Position**	**Date**

* Insert Organisation name here

PART 2 : Internal Integration Testing Approach

#	Item to be assessed	Your Response	Evidence to support your response
2.1	Please confirm that your organisation has a formally defined test strategy and has a test plan covering: • Internal Integration Testing • Data Transfer Testing • Inter-Participant Testing		
2.2	Who within your organisation is responsible for certifying that testing is complete?		
2.3	Please describe your Internal Integration Testing infrastructure.		
2.4	Please confirm that for both manual and semi-automated flows, tested work instructions and procedures are available.		
2.5	If you are an existing Participant entering a new market segment, please state whether your internal test plan includes testing of your data migration strategy, if applicable.		
2.6	Please state whether your internal test plan includes testing of your billing system.		

#	Item to be assessed	Your Response	Evidence to support your response
2.7	Please state whether your internal test plan includes performance/volume testing		

PART 2A : Internal Integration Testing Assessment (ITA)

#	Item to be assessed	Your Response	Evidence to support your response
2.8	Please confirm that you have completed comprehensive Internal Integration Testing, in an end-to-end fashion, of your business solution.		
2.9	Please confirm that test results from your Internal Integration Testing are available to demonstrate that all of your business processes have been fully exercised in an integrated, end-to-end fashion.		
2.10	Please confirm that you can summarise the integration tests that have been carried out and the status of this testing.		

PART 2B : Data Transfer Testing (DTT)

#	Item to be assessed	Your Response	Evidence to support your response
2.11	Please confirm that you have completed Connectivity Testing.		
2.12	Please confirm that test results from your Data Transfer Testing (with ESB Networks) will be kept and made available for all applicable messages detailed within the Market Message Database.		
2.13	Please confirm that you will summarise the Data Transfer Tests that have been carried out and the status of this testing.		

PART 3 : Inter-Participant Testing (IPT)

#	Item to be assessed	Your Response	Evidence to support your response
3.1	Please state the version of your SAR that is applicable to the processes and applications that will be used in your execution of the IPT scenarios, and confirm that you have submitted this to the Assurance Body.		
3.2	Please confirm which systems and Business Processes will be used during IPT.		
3.3	Please confirm that you have discussed and agreed with the Assurance Body a plan for execution of the IPT.		
3.4	Please confirm that, by the time of IPT preparatory checks (carried out by the Assurance Body on commencement of IPT execution) you will have prepared physical scripts that cover all aspects of the IPT Scenarios.		
3.5	Please confirm that you will carry out the IPTs using your normal business processes (i.e. those that you intend to carry forward into live Market operation), calling on the scripts only where necessary to direct a test according to the scenario description.		

#	Item to be assessed	Your Response	Evidence to support your response
3.6	Please confirm that, by the time of the IPT preparatory checks (carried out by the Assurance Body on commencement of IPT execution) you will have co-ordinated with RMDS and assigned agreed values for all pre-requisite data items that are your responsibility and set up all pre-requisite files needed for IPT execution.		
3.7	Please confirm that the business users that are to operate your processes and applications during IPT execution have been identified.		
3.8	Please confirm that the business staff identified above will also operate your processes and applications when you have entered the live market.		
3.9	Please describe all of the organisations and their locations that will be involved in the IPT execution.		
3.10	Please confirm that the Assurance Body will have reasonable access to the locations in which the IPTs are to be executed, and the staff operating them, at all times.		

PART 4: Statement of Readiness for Market Operation

An appropriate company executive must sign this declaration, as a statement on behalf of your organisation that the conditions for entry into the Retail Electricity Market have been met.

PARTICIPANT ORGANISATION :

DECLARATION BY COMPANY EXECUTIVE

With the exception of those items explicitly detailed below we confirm that :

- **we believe that the systems and processes that will be used in the live Retail Electricity Market (detailed within the Self-Assessment Return) fully meet the Market Design Requirements, work together correctly and accurately, have been completely and successfully tested and are free from substantial problems;**
- **all internal systems that will be used in the live Retail Electricity Market that have not been directly involved in the Assurance Process have been completely and successfully tested, and contain no significant problems (these include, but are not limited to, customer service, billing and internal accounting systems).**

Please detail any exceptions here **:**

Approved by :

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Print Name	**Signature**	**Position**	**Date**