[Name and address of the Registered Participant]

[Commercial registration number of the Registered Participant]

[General email, telephone number of the Registered Participant]

To: AS “Augstsprieguma tīkls”

 Dārzciema Street 86

 Riga, LV-1073

 Latvia

Date: [Date Month, Year]

The Request for the Modification in the Collateral

Dear Sir or Madam,

With reference to Article 24 (1) of the Harmonized Allocation Rules for Forward Capacity Allocation we are requesting a decrease of our collateral provided for securing payments to the Allocation Platform for Auctions of the Long Term Transmission Rights on Estonia – Latvia border.

Please, make a respective payment:

|  |  |
| --- | --- |
| Registered Participant name: | [Name of the Registered Participant] |
| Participant Agreement: | [Number of the Participant Agreement] |
| Amount: | [Amount in EUR] |
| Bank Account Information: | [Number of the Account and other relevant Account Information] |
| Due Date: | [Date Month, Year] |

Yours sincerely,

[Name, Surname, Position and Signature of the person authorised to represent the Registered Participant]