OUTAGE/REGION

**[Enter information here.]**

DOCUMENT INFORMATION

ERCOT ID: [RAP\_2024\_XX] Exit Review: 2024 Annual Review

Revision: [REV #] Rev. Date: [Month DD], 2024

Author: [NAME] Point of Contact: SHIFT ENGINEER x6354

Contingency: [ID] Case Study: [STUDY ID]

INITIAL PROBLEMS

[Provide description of initial problem here.]

CORRECTIVE ACTIONS

|  |  |  |  |
| --- | --- | --- | --- |
| **STEP #** | **TO** | **ACTION** | **CHECK** |
| 1. | [Name] | [Enter action here] |  |
| 2. | [Name] | [Enter action here] |  |

RESULTING CONDITIONS

[Describe resulting conditions here.]

RELAY LOADABILITY

Emergency Rating of Constraint = [XXX.XX] MVA

Highest Overload = [XXX.XX] MVA ([XX]% of emergency rating)

Most Limiting Relay Minimum Pickup = [XXX] MVA

ADDITIONAL INFORMATION

[Enter any additional information here.]

REVISION HISTORY

Original [mm/dd/yyyy] – Initial version

Rev 1 [mm/dd/yyyy] – [Enter short description of change(s) here.]

Rev 2 [mm/dd/yyyy] – [Enter short description of change(s) here.]