Annex C.1. Guidelines in Filling-up Supplier Company Profile (RES-PROFILE) Template

Column	Field Name	Description	Data Format	Data Requirement
А	Participant ID	Corresponds to the User ID provided by the DEPDMS Administrator. EOF (End Of File) shall be placed after the last filled-up cell in column A.	Alphanumeric	Mandatory
В	Name of RES/LRES	Corresponds to the Full name of Supplier as registered in the WESM. Never use comma (,). Use forward slash (/) as line separation instead of comma (,). e.g. ABC Electric Cooperative/Inc.	Alphanumeric	Mandatory
С	Office Address	Corresponds to the main office address of the Supplier. Never use comma (,). Use forward slash (/) as line separation instead of comma (,). e.g. Energy Center/ Rizal Drive/ BGC/ Taguig City	Alphanumeric	Mandatory
D	License/Certificate No.	Corresponds to the License or Certificate number to operate as Retail Electricity Supplier as provided by the ERC	Alphanumeric	Mandatory
E	Head of Company	Name of the Head of Company	Alphanumeric	Mandatory
F	Position/Designation	Position/Designation of the Head of Company	Alphanumeric	Mandatory
G	WESM Compliance Officer	Name of the WESM Compliance Officer	Alphanumeric	Mandatory
Н	Contact No.	Official Telephone or mobile number of the Compliance Officer	Numeric	Mandatory
I	Email Address	Office email address of the Compliance Officer	Alphanumeric	Blank, if not applicable