

## Market Change Request

Number		Title	Priority
<b>MCR</b>	<b>143</b>	Update to the xml schema to remove a pattern validation on the GUID field.	High

Date	Version	Reason For Change
10 <sup>th</sup> April 2007	1.0	<i>Initial draft of the MCR document. This document has been created to remove a pattern validation within the xml schema relating to the GUID field.</i>

### PART 1 CHANGE REQUEST:

<b>Name of Requesting Organisation</b>	<b>SEM Group</b>		
<b>Contact name</b>	<b>Theresa O'Neill</b>		
<b>Date Change Request Raised</b>	15 <sup>th</sup> March 2007	<b>Originating Discussion Request</b>	
		<b>DR</b>	141

### Detail of Change Request

The data definition for the Generator Unit ID field was baselined in the Retail Market Design at version 6.0, as detailed within MCR 120, as part of the suite of changes to satisfy new requirements of SEM implementation.

The draft XML schema issued on the 1st of March includes provision for a pattern validation to match the new SEM Participant GUID format of GU\_nnnnnn.

As the GUID field will be used to contain both Pre-SEM Participant Generator Unit ID 3 digit values and also 4 digit Export Arrangement IDs for Non Participant Generator sites it is proposed that this pattern validation is removed. The field will remain as a 9 long field in the XML, this will allow this field to be populated in xml with anything from 0 to 9 characters.

Note: the data definition within the Market Design will remain as is.

### Reason for Change Request

Less restrictive XML validation

### Scope of Change Request

Correction to Documentation	Business Process	Market & MP Systems	MPCC	Readings Processor	Market Gateway	Schema	Web Forms
<b>X</b>						<b>X</b>	

### Identification of Baseline Products Impacted

### Description of Trading & Settlement Code Impact (if any)

<b>PART 2 MARKET ASSURANCE:</b>				
<b>Applicability</b>				
ESB Networks	Suppliers	TSO	SMO	Generators
<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>
<b>Scope of Test</b>				
Connectivity	DTT	MSA	IPT	Other
<b>X</b>	<b>X</b>			
			No. Of Scenarios	

<b>Date of issue of Change Request</b>	
<b>Date response is required</b>	

<b>PART 3 RESPONSES AND MODIFICATIONS:</b>
<b>Collation of Impact Assessment</b> <i>(from Form C)</i>
<b>Modifications Included</b>
<b>Reason for Modifications</b>

<b>PART 4 ASSESSMENT &amp; RECOMMENDATION:</b>			
<b>Part 4(a) ASSESSMENT</b>			
<b>Summary of Impact Assessment</b>			
<b>Recommendation on Implementation Plan</b>			
<b>Part 4(b) RECOMMENDATION</b>			
<b>ACCEPTANCE</b>	<b>REJECTION</b>	<b>NO RECOMMENDATION</b>	<b>COMMENT</b>
<b>Reason for Recommendation</b>			
<b>Date of Recommendation</b>			

