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|  | **Regulated Price Plan Roadmap**  **Pilot Program**  **Monitoring Report** |

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| **Pilot Program:** |  |
| **Distributor(s):** |  |
| **Designated Contact:** |  |
| **Contact Information:** |  |
| **Date:** |  |

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| **Monitoring Report Number:** |  | |
| **Submission Date:** |  | |
| **Revised Submission:** | **Yes** | **No** |
| **If Yes, Date of Original Submission:** |  | |
| **Expected Submission Date for Next Monitoring Report:** |  | |

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| **1. Milestone Description** |
| List the milestones from your Approved Pilot Program Proposal and identify those milestones that are relevant to this Monitoring Report |
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| **2. Pilot Activities and Deliverables** | | |
| Based on the information provided in section 1, please outline the individual activities and deliverables for this Milestone and note their status. Please add rows as necessary | | |
| **Activity/ Deliverable** | **Completed (Y/N)** | **Progress and Results (please refer to any separate files)** |
| e.g.  Enroll Participants | Y | * Participant application form available on website * Communications and outreach launched |
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| **3. Pilot Cost Summary** | | | |
| Complete this table based on the contracted pilot budget and expenditures for this Milestone. Alternatively, you may submit a separate spreadsheet with these figures  \*Note: detailed billing information is not required by the OEB to substantiate costs. Billing information (receipts, invoices from vendors, etc.) should be kept by your organization for audit purposes | | | |
| **Project Activity** | **Major Task Area** | **Budget** | **Actual** |
| e.g. Create communications collateral | Enrol Participants | $1,000 | $920 |
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| **4. Key Metrics** | | | |
| In the table below, summarize any quantifiable outcomes from your pilot to date. Outcomes should include such activities as the number of participants enrolled, total spend, number of devices installed, number of shadow bills issued, etc. | | | |
| **Outcome** | **Planned Total**  **(as per Project Plan)** | **Total for this Period** | **Cumulative Total** |
| Enrolment Rate |  |  |  |
| Total Spend |  |  |  |
| Installation of Devices (if applicable) |  |  |  |
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| Please explain any material differences between the Planned Total, as identified in your project plan, and the Cumulative Total | | | |
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| Please discuss if your progress to date is on target based on your project plan | | | |
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| **5A. Project Team** |
| Provide an update on your project team, including staffing changes, changes in responsibility, etc. |
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| **5B. Collaboration** |
| Report on the status of your collaborative efforts with existing partners, project participants, other funders and stakeholders. Note any new collaborations or potentially useful collaborative arrangements that you may have initiated or are thinking of initiating. Please provide examples |
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| **6. Pilot Progress Details** |
| In a bulleted list, summarize the lessons learned to date. This section is intended to be a distillation of the key lessons that can be passed on to others engaging in similar types of initiatives. Do not refrain from sharing these experiences as they can potentially save others time and effort |
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| Given your recent experiences, if you were proposing this pilot now, is there anything you would refine or plan to do differently? |
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| Are there any other issues or concerns you would like to raise? |
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| **7A. Communications from this Milestone** | |
| List any project-related communications from the current reporting period. Please note any press releases, media events, notable site visits, media mentions, etc. and included them as attachments to this report | |
| **Name of event/ article/ media piece** | **Details** |
| e.g. Article in the local newspaper | * Project profiled in local newspaper on June 2, 2017 * PDF scan of article attached (name of file) |
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| **7B. Upcoming Communications** | |
| List any upcoming communication opportunities | |
| **Name of event/ article/ media piece** | **Details** |
| e.g. Public information session on pilot | Event to be held on July 13, 2017 and will cover topics such as demand management and green technology. |
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| **8. Supporting Documents** |
| Provide a list of all the attachments and appendices you are including as a part of this report, including their file names/ types |
| 1. Budget-actual expenses spreadsheet (name of file.xls)  2.  3. |

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| **9A. Administration (OEB Staff Use Only)** | | |
| **Report Reviewed** | **Yes** | **No** |
| Concerns (discussed with Distributor(s)): | | |
| **Changes required to Contribution Agreement** | **Yes** | **No** |
| Rationale: | | |
| **Signature of OEB staff**  Name:  Date:  Name:  Date: | | |
| **9B. Process (OEB Staff Use Only)** | | |
| Distribute report internally  Set up meeting with project team  Distribute project deliverables (obtain project team consent) | | |