

Application for Electricity Distribution Licence Ontario Energy Board 2300 Yonge Street P.O. Box 2319 Toronto, ON M4P 1E4 Telephone: 1-888-632-6273 Facsimile: (416) 440-7656 Commission de l'Énergie de l'Ontario 2300 rue Yonge C.P. 2319 Toronto, ON M4P 1E4 Téléphone: 1-888-632-6273 Télécopieur: (416) 440-7656

Application Instructions

1. Purpose of this form

The purpose of this form is to collect information to determine whether the Applicant will be granted a licence to distribute electricity.

2. Structure of the Application Form

This form contains the following sections:

- A General Information;
- B Distribution Facilities Information;
- C Supporting Information
- D Notice and Consent and
- E Acknowledgement

Note: The information in section C16 shall be kept confidential, with the exception of names and positions held of key individuals. All other information filed as part of this application will be considered public. Where the applicant objects to public disclosure of the information, the applicant must follow the Ontario Energy Board's approved Guidelines for Treatment of Filing made in Confidence, effective March19, 2001.

3. <u>Completion Instructions</u>

PRINT CLEARLY or TYPE all information in BLACK. Please send two copies of the completed form and all attachments to:

Board Secretary Ontario Energy Board 2300 Yonge Street P.O. Box 2319, 26th Floor Toronto, ON M4P 1E4

4. Licence Fees:

A non-refundable application fee is required to process your application. Please enclose a cheque or money order made payable to the **ONTARIO ENERGY BOARD**.

Note: If a licence is issued, the Licensee will be required to pay an annual fee of \$800.00.

5. <u>Important Information:</u>

As a licenced Electricity Distributor, the licencee may be subject to additional obligations as required by the Independent Electricity System Operator (IESO) and as established under section 70 or section 78 of the *Ontario Energy Board Act*, *1998*.

REMARQUE: Ce document est disponible en français.

OEB App05A - July/05

Ontario Energy Board Commission de l'Énergie de l'Ontario **Application for Electricity Distribution Licence**

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	For Office Use Only				
	Application Number				
	Date Received				

A. General information

1. Type of Application

New licence	
Renewal	
Amendment to an existing Licence	

2. Ownership/Operation

Pleas	se indicate whether the Application is for:
	Ownership and Operation of a distribution system
	Ownership of a distribution system only. Please provide the name and licence no., if any, of the operator of the distribution system?
	Operation of a distribution system only. Please provide the name and licence no., if any, of the owner of the distribution system?

3. Applicant

Please provide the following information about the Applicant:					
Full Legal Name of Applicant		Ontario Corporation Number, Canadian Corporation Number or Business Registration Number		Date of Formation or Incorporation	
Business Address:					
City Province			Country	Postal/Zip Code	
Phone Number	FAX Number		E-Mail Address (if applicable)		

4. Primary Contact for this Application

Please	Please provide the following information about the Primary Contact for this Application:							
Mr. Miss Other:					Initial:			
				Position	n Held:			
Conta	Contact Address (if R.R., give Lot, Concession No. and Township)							
City Province					Province	Country	Postal/Z	ip Code
Phone	e Num	nber			FAX Number	E-mail Address (if applicable)		

5. Service Area

Please indicate the location (name of municipality or unorganized territory) of the Applicant's distribution facilities and provide a description of the extent (size, length, coverage) of the distribution facilities involved in this Application. This description will be used for the purpose of stating a service area in which the licensee would be authorized to distribute electricity:

6. Facilities Use

Please indicate whether the distribution facilities are for exclusive us	e by Yes	No	
Applicant.	, L		

B. Distribution Facilities Information

7. Facilities Type	
Please indicate wh	nether the Applicant's distribution facilities are:
New assets	s to be constructed? Proposed In-service date:
If Applicant	is to be the owner, please attach a statement explaining the financing arrangements.
Existing as	sets presently owned and/or operated by the Applicant?
Existing as	sets not presently owned and/or operated by the Applicant (ie to be purchased)?
If Applicant	is to be the owner please indicate:
a) from whom ass	sets will be purchased:
b) when application	on for sale has/will be filed with the Board?
Other (plea	ise describe):

8. Fac	ilities Purpose
Pleas	e indicate the intended purpose(s) of the Applicant's distribution facilities:
	To provide a connection between a generator and a transmission/distribution system.
	To provide a connection between a transmission/distribution system and a load customer or customers.
	To provide a connection between a generator and a load customer or customers.
	To provide distribution services to the general public.
	Other (please describe):

9. Description of Facilities

Please describe the Applicant's distribution facilities indicating operating voltage(s) (kV), length of distribution line (km), number of substations and approximate total supply capacity (MW):

10. Location of Facilities

Please indicate whether the distribution facilities will be located on, over or under public streets or highways.

Yes	No

C. Supporting Information Organizational Information

11. Business Classification

Sole Proprietor			
Partnership			
Corporation			
Other			

12. Affiliates of the Applicant

a) Please provide the following information for all Affiliates of the Applicant (attach a copy of 12(a) for each affiliate).							
Full Legal Name of Affiliate Company:							
Business Address:							
City	Province	Country	Postal/Zip Code				
Tel. Number	FAX Number	E-Mail Address (if app	olicable)				
Description of Busines	s Activities:						
b) Please attach a Corporate organization chart describing the relationships between the Applicant and its Affiliates and, if applicable, the respective ownership percentages by the Applicant in each Affiliate.							

13. Energy Sector Activities	
Has the Applicant or an Affiliate undertaken any energy sector activities in Ontario or any other jurisdiction?	Yes No
If yes, please provide the following information for each:	
Full Legal Name of Company:	Licence/Registration Number:
Jurisdiction:	Type of Business Activity (e.g. Generation, Transmission, Distribution):

Technical Capability and Experience Information 14. Business Activities

Please provide a description of the Applicant's business activities:

15. Technical Ability

15. 1	To. Technical Ability				
	 Please describe the applicant's technical ability to carry out the activities applied for including the Applicant's specific experience in Ontario and in other jurisdictions. 				
	f the Applicant intends to utilize th activities and to whom they will be	e capability of others by contracting distribution activities, please indicate below which contracted:			
	Design	Contracted to:			
	Construction	Contracted to:			
	Inspection & Maintenance	Contracted to:			
	Operation	Contracted to:			
	Customer Connection	Contracted to:			
	Standard Supply Service	Contracted to:			
	Metering & Metering Services	Contracted to:			
	Settlement & Billing	Contracted to:			
	Other (describe):	Contracted to:			
1		•			

6. Information About Each Key Individual							
Mr. □	Mrs.□	Last Name:		Full First Name:		Initial:	
Miss D Other:	Ms. □	Position Held:					
Please e	xplain the pe	erson's experience in the e	lectrical distributic	on business and in the er	nergy field in ger	neral.	
		een a proprietor, partner, of IV or Part V of the <i>Ontario</i>			anted a	Yes	No
lf yes, experi	-	iness names and licence n	umber(s) and de	scribe the individuals spe	ecific related		
		een a proprietor, partner, of s or any other acts or legisl		of a business that was re	gistered or	Yes	No
		business name, the legisla e individual's specific relate		per(s), date of the licenci	ng or		
		een a proprietor, partner, of I refused, suspended, revo			egistration or	Yes	No
If yes, of lice		ide company name and de	scribe the situatio	n, including the jurisdicti	on and type		

Note:

Attach a copy of Item 16 for each Key Individual: Officer and Director, Partner or sole Proprietor.

Financial Information 17. Financial Statements

Please attach financial statements of the Applicant for each of the past two fiscal years. This may include audited financial statements, annual reports, prospectuses or other such information.

Other Information 18. Delivery

	ease indicate whether the Applicant's distribution facilities are to be used to deliver electricity to one or ore parties other than the Applicant. If yes, please provide the following information:	Yes	No
a)	if the purpose of the Applicant's distribution facilities is to provide distribution services to specific generat customers rather than the general public (see question #8) please indicate the names of these participants of the second secon		ıd

- b) a summary of the business plans relating to the Applicant's proposed distribution business for the next five years. This should include the following:
 - a forecast of annual growth in terms of factors such as the amount of electricity distributed (MW and/or MWH), number of customers served, amount of distribution facilities (lines and/or stations), etc.
 - annual pro forma financial statements including forecasts of costs, revenues and project financing indicating the underlying assumptions on which the forecasts are based.

c) estimates of net annual cash flows for subsequent periods to demonstrate financial feasibility and security.

d) indication of the Applicant's plans to seek Ontario Energy Board approval for electricity distribution rates.

19. Proposed Business Transactions

	Please provide a brief summary of the expected impact of the proposed business transactions on the Ontario electricity market under the following headings:				
a)	Facilitate competition and enhance access to transmission/distribution services:				
b)	Improve reliability and quality of supply:				
c)	Promote economic and energy efficiency:				

20. Electricity Sector Activities

Please indicate whether the Applicant intends to be involved with electricity sector activities in the Ontario market other than distribution and provision of Standard Supply Service?				
Buy or Sell (Wholesale) electricity	Yes No			
Transmit electricity				
Retail electricity				
Generate electricity				
If yes to any of the above:				
a) If affiliates have not yet been established, please indicate when this is planned:				

b) Has the Applicant or an affiliate applied for Ontario Energy Board Licences? If no, when planned?	Yes No

D. Notice and Consent for Ontario Board to Collect Additional Information

ASI	AS REQUIRED BY THE FREEDOM OF INFORMATION AND PROTECTION OF INDIVIDUAL PRIVACY ACT				
In order to complete or verify the information provided on this form, it may be necessary for the Ontario Energy Board to collect additional information from some or all of the following sources: federal, provincial/state and municipal governments; licensing bodies; banks; professional and industry associations; and former and current employers. Only information relevant to your application will be collected.					
The public o	ficial who can answer questions about	the collection of information is:			
	Note: The issuance of an electricity distribution licence does not guarantee accreditation by the IESO, or connection to a transmission or distribution system.				
NOTE:	NOTE: This application must be signed by the proprietor or by at least one partner, officer or director of the organization.				
WARNING:	It is an offence to knowingly provide fa	alse information on this application.			
I/We consent to the collection of this information as authorized under the <i>Ontario Energy Board Act,</i> 1998.					
I/We understand that this information will be used to determine whether I am/we are and remain qualified for the licence for which I am/we are applying.					
Print Name a	and Title	Signature of Applicant(s)	Date Signed		

E. Acknowledgement of Market Rules, Codes and Conditions

NOTE:	This acknowledgement must to organization.	be signed by the proprietor or by at least one	e partner, officer or director of the		
I understar	nd and acknowledge that, as a l	icenced electricity distributor, I will be requir	ed, unless otherwise exempted:		
• To	o provide non-discriminatory ac	cess to all persons wishing to connect to the	edistribution system.		
	 To comply with all licence conditions including the provisions of: Affiliate Relationships Code for Electricity Distributors and Transmitters Distribution System Code Retail Settlement Code Standard Supply Service Code Retail Metering Code Market Rules made under section 32 of the <i>Electricity Act, 1998.</i> 				
Print Name and Title		Signature of Applicant(s)	Date Signed		

CHECKLIST

Have You:

1.	Properly and fully completed this form? (Illegible, incomplete or improperly completed forms do not qualify for registration and will be delayed or returned.)		
2.	Enclosed a cheque or money order payable to the ONTARIO ENERGY BOARD in the amount prescribed?		
3.	Attached Section D, the signed "Notice and Consent" form, as specified?		
4.	Attached Section E, the "Acknowledgement" form, as specified?		
5.	Submitted two copies of the application?		
Please	send the completed form and all attachments to: Board Secretary Ontario Energy Board		
	2300 Yonge Street P.O. Box 2319 , 26th Floor Toronto, ON M4P 1E4		
NOTE: You are not required to return the cover page or this checklist to the Ontario Energy Board.			