

**Streamlined Electricity Transmission Licence Renewal Application**

1. **Applicant**

|  |  |
| --- | --- |
| Name of Applicant | |
| Address | Telephone Number |
| Email Address |
| Corporate Website |
| Licence Primary Contact:  Name and Title | Telephone Number |
| Email Address |
| Application Primary Contact:  (If different from Licence Primary Contact above)  Name and Title | Telephone Number |
| Email Address |

1. **Current Licence Information**

|  |  |
| --- | --- |
| 2.1 | Licence Number |
| 2.2 | Licence Expiry Date |

1. **Applicant’s Key Individuals**

Please provide a list of key individuals responsible for executing the following functions for the applicant: matters related to regulatory requirements and conduct, financial matters, and technical matters. The list must also include the executives responsible for the following roles: the chief executive officer, the chief operating officer, the chief financial officer or equivalent positions.

|  |  |  |  |
| --- | --- | --- | --- |
| Name of Key Individual | Title/Position | Telephone Number | Email Address |

1. **Affiliates of the Applicant**

4.1 Please provide the following information for all Affiliates of the Applicant (attach a copy of 4.1 for each affiliate)

|  |  |
| --- | --- |
| 4.1.1 | Full Legal Name of Affiliate Company |
| 4.1.2 | Description of Business Activities of Affiliate Company |
| 4.1.3 | If Affiliate Company is licensed, provide licensing information |
| 4.1.4 | Affiliate Company’s website, if available |

4.2 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.

1. **Specification of Transmission Facilities**

|  |  |
| --- | --- |
| 5.1 | Please confirm that the licensee’s transmission facilities are accurately described in Schedule 1 of its existing transmission licence. |
| 5.2 | If the transmission facilities are not accurately described in Schedule 1 of the licence, please provide an updated specification of the facilities and explanation for the discrepancy. |

1. **List of Code Exemptions**

|  |  |
| --- | --- |
| 6.1 | Please list all code exemptions included in Schedule 3 of the licence and identify any code exemptions that are no longer necessary and may be removed from the licence. |

**CERTIFICATION AND ACKNOWLEDGMENT**

1. I certify that the information contained in this application and in the documents provided are true and accurate.
2. I confirm that there are no outstanding fees assessed by the OEB, RRR filings or other information requests.
3. I certify that the licensee is compliant with all applicable provisions of the Transmission System Code and the Affiliate Relationships Code for Electricity Distributors and Transmitters, and all other conditions set out in their licence subject to any approved exemption(s).

|  |  |  |
| --- | --- | --- |
| Signature of Key Individual | Name and Title of Key Individual | Date |

(Must be signed by Chief Executive Officer, Chief Operating Officer, President or other person of equivalent position.)