

## Application for an Electricity Generation Licence Feed-in Tariff Program

### Application Instructions

RECEIVED  
OCT 02 2012



ONTARIO ENERGY BOARD  
OFFICE OF THE BOARD SECRETARY

#### 1. Application Requirement

Before applying for a licence the applicant must have entered into a contract with the Ontario Power Authority under the Feed-in Tariff program and have received from the Ontario Power Authority a Notice to Proceed for the generation facility/facilities covered by this application.

**You must attach a copy of the Notice to Proceed to your completed application form. Without a copy of the Notice to Proceed your application will be deemed incomplete.**

#### 2. Purpose of this Form

This form is to be used to apply for a licence that would enable the applicant to generate electricity for sale under the Feed-in Tariff Program.

**Note: MicroFit Program generators and Feed-in Tariff Program generators with gross nameplate capacity of 500 kilowatts or less are exempt from the need to obtain a generation licence.**

#### 3. Completion Instructions

This form is in a writeable PDF format. The applicant must either:

- type answers to all questions, print two copies and sign both copies; or
- print a copy of the form, clearly print answers to all questions, make a copy and sign both copies.

Please send two signed copies of the completed form and attachments to:

Board Secretary  
Ontario Energy Board  
P.O Box 2319  
2300 Yonge Street, 27<sup>th</sup> Floor  
Toronto, ON M4P 1E4

If you have any questions on completing this application, please contact the Market Operations Hotline at 416-440-7604 or 1-888-632-6273 or e-mail at [market.operations@ontarioenergyboard.ca](mailto:market.operations@ontarioenergyboard.ca).

The Board may require information that is additional or supplementary to the information required by this form. If the submitted application is incomplete, it may be returned by the Board or there may be a delay in processing the application.

#### 4. Application and Registration 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. The amount of the application fee is indicated on the "Apply for a Licence" page of the "Licences" section of the Board's website at [www.ontarioenergyboard.ca](http://www.ontarioenergyboard.ca).

If a licence is issued, the licensee may be required to pay an annual registration fee. The annual registration fee criteria can be found on the "Apply for a Licence" page of the "Licences" section of the Board's website at [www.ontarioenergyboard.ca](http://www.ontarioenergyboard.ca).

#### 5. Public Record

All information filed as part of or in support of this application will be placed on the public record. Where the applicant objects to public disclosure of information contained in the application, the applicant must follow the procedure set out in the Board's Practice Direction on Confidential Filings.

#### 6. Important Information

The applicant must make a copy of the application available to any person who requests a copy of the application.

As a licensed electricity generator, the licensee may be subject to additional obligations as required by a distributor, a transmitter, the Independent Electricity System Operator, the Ontario Power Authority, or the Ontario Energy Board.

Ontario Energy  
Board  
P.O. Box 2319  
2300 Yonge Street  
27<sup>th</sup> Floor  
Toronto ON M4P 1E4  
Telephone: 1-888-632-6273  
Facsimile: (416) 440-7656

Commission de l'énergie  
l'Ontario  
C.P. 2319  
2300, rue Yonge  
27<sup>e</sup> étage  
Toronto ON M4P 1E4  
Téléphone: 1-888-632-6273  
Télécopieur: (416) 440-7656



## Application for an Electricity Generation Licence Feed-in Tariff Program

| For Office Use Only |                |
|---------------------|----------------|
| Application Number  | EB - 2012-0356 |
| Date Received       | Oct. 2/12      |

### 1. Name to Appear on Licence

Legal name of the Applicant RE Orillia 1 ULC

Name to Appear on Licence: RE Orillia 1 ULC

☒ Indicate if same as above

Please note that if the name to appear on the licence is not the same as the legal name, the name on the licence must include the legal name of the applicant and the legal name must appear first. The "Name to Appear on Licence" will appear on the notice of application and on the licence.

### 2. Feed-in Tariff Program Contract and Notice to Proceed

Provide details regarding FIT contract with the OPA and Notice to Proceed

FIT Reference #: FIT - 000535-SPV-130-505

Contract Date: April 14, 2010

Date Notice to Proceed was received: August 1, 2012

**Note: Your application cannot be processed until the OPA issues a Notice to Proceed for your project.  
Please submit a copy of the Notice to Proceed with your application.**

### 3. Applicant's Business Information

☐ Sole Proprietor

☐ Partnership

☐ Corporation

☒ Other (describe) Unlimited Liability Company

Date of Formation: November 18, 2009

Contact Address (if RR, give Lot, Concession No. and Township)

300 California Street, 7th Floor

City

Province/State

Country

Postal/Zip Code

San Francisco

CA

USA

94104

Phone Number

Fax Number

E-mail Address

415-675-1500

415-675-1501

legal@recurrentenergy.com

#### 4. Key Individuals

The individuals listed as key individuals must be the individuals that are responsible for executing the following functions for the applicant: matters related to regulatory requirements and conduct, financial matters, and technical matters. These key individuals may include the Chief Executive Officer, the Chief Financial Officer, other officers, directors, or proprietors. Identify at least two key individuals. (If the applicant has only one key individual in the organization, identify the one key individual.)

| Name of Key Individual | Title/Position within Applicant's Business (or identify company if not the Applicant's Business) |
|------------------------|--------------------------------------------------------------------------------------------------|
| Bob Leah               | Director, East Region Development                                                                |
| Andrew Griffiths       | Director, Asset Management                                                                       |
| Sheldon Kimber         | Vice President                                                                                   |

#### 5. Licence Primary Contact

(As a condition of the licence, the licensee shall designate a person who will act as a primary contact with the Board on matters related to the licence.)

|                                                                                                                            |                            |                                                                            |                 |         |
|----------------------------------------------------------------------------------------------------------------------------|----------------------------|----------------------------------------------------------------------------|-----------------|---------|
| Mr. <input checked="" type="radio"/>                                                                                       | Mrs. <input type="radio"/> | Last Name                                                                  | First Name      | Initial |
| Miss <input type="radio"/>                                                                                                 | Ms. <input type="radio"/>  | Andrew                                                                     | Griffiths       |         |
| Other <input type="radio"/>                                                                                                |                            | Position Held and Company Name if different from Name to Appear on Licence |                 |         |
|                                                                                                                            |                            | Director, Asset Management                                                 |                 |         |
| Contact Address (if RR, give Lot, Concession No. and Township), or indicate as above in section 3 <input type="checkbox"/> |                            |                                                                            |                 |         |
| 300 California Street, 7th Floor                                                                                           |                            |                                                                            |                 |         |
| City                                                                                                                       | Province/State             | Country                                                                    | Postal/Zip Code |         |
| San Francisco                                                                                                              | California                 | USA                                                                        | 94104           |         |
| Phone Number                                                                                                               | Fax Number                 | E-mail Address                                                             |                 |         |
| 415-501-9495                                                                                                               |                            | andrew.griffiths@recurrentenergy.com                                       |                 |         |

#### 6. Primary Contact for this Application

☐ Indicate if same as in section 3. Proceed to section 7.

|                                                                                                                       |                            |                                                                            |                 |         |
|-----------------------------------------------------------------------------------------------------------------------|----------------------------|----------------------------------------------------------------------------|-----------------|---------|
| Mr. <input checked="" type="radio"/>                                                                                  | Mrs. <input type="radio"/> | Last Name                                                                  | First Name      | Initial |
| Miss <input type="radio"/>                                                                                            | Ms. <input type="radio"/>  | Leah                                                                       | Bob             |         |
| Other <input type="radio"/>                                                                                           |                            | Position Held and Company Name if different from Name to Appear on Licence |                 |         |
|                                                                                                                       |                            | Director, East Development                                                 |                 |         |
| Contact Address (if RR, give Lot, Concession No. and Township), or indicate if same as above <input type="checkbox"/> |                            |                                                                            |                 |         |
| 214 King Street West, Suite 402                                                                                       |                            |                                                                            |                 |         |
| City                                                                                                                  | Province/State             | Country                                                                    | Postal/Zip Code |         |
| Toronto                                                                                                               | Ontario                    | Canada                                                                     | M5H2H5          |         |
| Phone Number                                                                                                          | Fax Number                 | E-mail Address                                                             |                 |         |
| 416-477-3445                                                                                                          |                            | bob.leah@recurrentenergy.com                                               |                 |         |

## 7. Generation Facilities

a) Describe the generation facility by providing the following information. If the applicant has more than one facility, provide the information on additional facilities as an attachment.

Generation Type: ☐ Biogas ☐ Biogas (On-Farm) ☐ Landfill Gas  
☐ Renewable Bio-Mass ☒ Solar PV (Rooftop) ☐ Solar PV (Ground Mount)  
☐ Wind (Off-Shore) ☐ Wind (On-Shore) ☐ Waterpower

Gross Nameplate Capacity 10,000 ☒ kW ☐ MW

Expected Commercial Operation Date February 17, 2013

Facility Name and Address RE Orillia 1, 1599 Line 13 North Hawkestone, ON L0L 1T0

b) Does/will the applicant own and operate any of the following (check any that apply):

i) A distribution line that is used to distribute electricity within a generation facility described in section 7a) or from that facility to the distribution system of a Local Distribution Company?

☐ Yes, provide length of the distribution line in kilometres \_\_\_\_\_  
☒ No

ii) A transmission line that is used to distribute electricity within a generation facility described in section 7a) or from that facility to the IESO-Controlled Grid?

☐ Yes, provide length of the transmission line in kilometres \_\_\_\_\_  
☒ No

iii) A transformer station or distribution station that is used to transform the voltage of electricity at a generation facility described in section 7a), on a transmission line or on the distribution system of a Local Distribution Company?

☐ Yes  
☒ No

c) Responsibilities of Applicant:

☒ Owner and Operator  
☐ Operator (Please identify if you are leasing the facility and identify owner \_\_\_\_\_ )  
☐ Owner only (Please identify lessee/operator \_\_\_\_\_ )

If you are applying for only one of the two qualifications, please provide information on the status of the other qualification. The information should include confirmation as to whether or not the person or entity seeking the other qualification is licensed and if not, indicate when an application for the other qualification will be filed with the Board: \_\_\_\_\_



## 8. Connection

Provide details regarding connection of the generation facility. If the applicant has more than one facility, provide the information on additional facilities as an attachment.

a) Will the generation facility be connected to the Local Distribution Company?

- ☒ Yes, identify the Local Distribution Company and the connection point (i.e. feeder name, name of transformer station or distribution station to which the feeder is connected)

Hydro One; TS= Orillia: Feeder = M7

☐ No

b) Will the generation facility be connected to a Host Facility?

- ☐ Yes, identify the Host Facility and the connection point (i.e. feeder name, name of Local Distribution Company or Transmitter serving Host Facility, name of feeder or circuit connecting Host Facility, name of transformer station or name of switching station, name of transformer or distribution station to which the feeder is connected)

☒ No

c) Will the generation facility be connected to a transmission system (the IESO-Controlled Grid)?

- ☐ Yes, identify the connection point (i.e. name of circuit, name of transformer or switching station)

☒ No

If you have answered "No" to a), b) and c), please explain how you intend to connect the project.

## 9. Requirement to Give Notice

Is the applicant a distributor or transmitter, or an affiliate of a distributor or transmitter?

- ☐ Yes, the applicant may be required to give notice to the Board under section 80 of the *Ontario Energy Board Act, 1998* regarding the construction or acquisition of an interest in generation facilities by transmitters or distributors. The filing requirements for a notice under section 80 of the *Ontario Energy Board Act, 1998* are found on the Board's website at [www.ontarioenergyboard.ca](http://www.ontarioenergyboard.ca).

☒ No

Will the applicant acquire an interest in a distribution or transmission system in Ontario or construct a distribution system or transmission system?

- ☐ Yes, the applicant may be required to give notice to the Board under section 81 of the *Ontario Energy Board Act, 1998* regarding the construction or acquisition of an interest in transmission or distribution assets by generators. The filing requirements for a notice under section 81 of the *Ontario Energy Board Act, 1998* are found on the Board's website at [www.ontarioenergyboard.ca](http://www.ontarioenergyboard.ca).

☒ No

## 10. Licensing History

a) Has the applicant ever been licensed by the Ontario Energy Board?

☐ Yes ☒ No

If yes, please provide the licensed company name, licence number and address:

Licensed Company Name \_\_\_\_\_

Licence Number \_\_\_\_\_

Address \_\_\_\_\_

b) Has the applicant ever had an energy market related licence or registration in Ontario and/or other jurisdiction within North America refused, suspended, revoked or cancelled?

☐ Yes ☒ No

If yes, provide details: \_\_\_\_\_

## 11. Notice

### AS REQUIRED BY THE *FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT*

The Board is authorized, under section 4.14 of the *Ontario Energy Board Act, 1998*, to collect personal information for the purpose of carrying out its duties and exercising its powers under the *Ontario Energy Board Act, 1998* or any other Act.

The information provided both on this form and attached to this form is being collected by the Board for the purpose of determining whether the applicant is qualified to receive the licence for which it is applying.

In order to verify the information on or attached to this form and/or determine whether the applicant is qualified to receive the licence for which it is applying, it may be necessary for the Board to collect additional information from some or all of the following sources: federal, provincial/state, or municipal governments; licensing bodies; law enforcement agencies; credit bureaus; and banks. Only information relevant to the application or the Board's determination of the application will be collected by the Board.

The public official who can answer questions about the collection of the information is:

Board Secretary

Ontario Energy Board

P.O Box 2319

2300 Yonge Street, 27<sup>th</sup> Floor

Toronto, ON M4P 1E4

Tel: 416-481-1967 or 1-888-632-6273

Applicants are reminded that the Board is subject to the *Freedom of Information and Protection of Privacy Act* ("FIPPA"). FIPPA addresses circumstances in which the Board may, upon request, be required to release information that is in its custody or under its control, and generally prohibits the Board from releasing personal information.

"Personal Information" has the meaning given to it under FIPPA.

## 12. Certification and Acknowledgement of Other Market Conditions

I certify that the information contained in this application and in the documents provided to the Board are true and accurate.

I understand and acknowledge that, as a licensed electricity generator, I must provide information as the Board may require from time to time.

I understand and acknowledge that, as a licensed electricity generator, I must enter into agreements with the distributor or transmitter to whom my facilities are connected.

|                                                             |                                                                                                             |                          |
|-------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|--------------------------|
| Print Name of Applicant<br>Sheldon Kimber<br>Vice President | Signature of Applicant<br> | Date Signed<br>10/1/2012 |
|-------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|--------------------------|

(Must be signed by one of the key individuals identified in section 4)