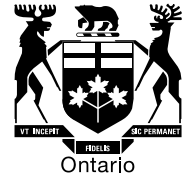


**Ontario Energy
Board**
P.O. Box 2319
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2300 Yonge Street
Toronto ON M4P 1E4
Telephone: 416- 481-1967
Facsimile: 416- 440-7656
Toll free: 1-888-632-6273

**Commission de l'énergie
de l'Ontario**
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2300, rue Yonge
Toronto ON M4P 1E4
Téléphone: 416- 481-1967
Télécopieur: 416- 440-7656
Numéro sans frais: 1-888-632-6273



BY E-MAIL

March 10, 2014

Mr. David Jemmett
President
Powred Connections Inc. DBA PCI Energy
7 Greenan Road
Stouffville ON L4A 7X4

Dear Mr. Jemmett:

**Re: Powred Connections Inc. DBA PCI Energy
Application for Gas Marketer Licence
Board File Number EB-2014-0045**

The Board has reviewed your application for a gas marketer licence. Your application is currently incomplete and cannot be processed until the following has been filed:

1. Section 17 – Certification and Acknowledgement:

As indicated in the application form, this section must be signed by:

- (a) the proprietor or by at least one partner, officer or director of the organization; and
- (b) each key individual identified in section 8(b).

2. Additional Information – OPP Security Screening Check Form:

The Board requires the completion of the attached form entitled “Security Screening Check” for the processing of your application. Each key individual is required to complete, sign, date and return this form to the Board. The completed forms together with the two pieces of identification are necessary for the Board to conduct a police record check with the Ontario Provincial Police on each of the key individuals identified in the application. Please note that the forms must have a wet signature and copies will not be accepted.

The Board will resume processing your application once the above information has been filed. If the above information is not filed within 30 days of the date of this letter,

the Board may close the file for this application.

Upon receipt of the required information the Board will issue an acknowledgement letter indicating the expected date on which a decision and/or order may be rendered.

Please send hard copies only of the additional information to the attention of the Board Secretary and please quote the Board's file number which is referenced above.

Please direct any questions relating to this application to Vince Mazzone, Advisor at +1 (416) 544-5159 or e-mail, Vince.Mazzone@ontarioenergyboard.ca.

Yours truly,

Original signed by

John Pickernell
Assistant Board Secretary

Attachment



Ontario
Provincial
Police

Security Screening Check

Altering or tampering with this form, including any information on or attached to it that has been provided by a member of a law enforcement agency is a Criminal Code offence.

Personal information contained on this form is collected pursuant to the *Police Services Act*, section 41 and federal and provincial privacy legislation and is collected for the purpose of processing this security screening check. Questions concerning this collection should be directed to Ontario Provincial Police Operational Policy and Strategic Planning Bureau at 705-329-7561.

Organization/Agency to determine level of security screening check required for the applicant, based on the purpose of the record check (see below) and provided the applicant has consented to the level of the security screening check.

Please read the attached document, *Security Screening Check – Information for the Applicant* for further information on what each security screening check includes.

This security screening check will include the following information as it exists on the date of the search or searches

Level 1

- ☒ A search of Criminal convictions from the RCMP National Repository of Criminal Records (Identification Databank), the Canadian Police Information Centre and local police databases where applicant resides or resided for the past 5 years.
- ☐ A search of outstanding entries from the Canadian Police Information Centre (Intelligence and Investigative Databanks), such as charges and warrants; judicial orders e.g. Peace Bonds, Probation and Prohibition orders; Absolute (1 year) and Conditional Discharges (3 years) made pursuant to section 730 of the Criminal Code of Canada (from local databases only).
- ☐ Ministry of Transportation Ontario - Driver's License History (Ancillary Databank).

Level 2

- ☐ A search of local police databases for occurrences which did not result in charges. (e.g. police contacts including but not limited to theft, weapons, sex offences, or violent, harmful and threatening behaviour).
A search of local police databases for criminal charges that did not result in a conviction or finding of guilt. (e.g. dispositions including, but not limited to, stayed, withdrawn, dismissed, and cases of not criminally responsible by reason of mental disorder as listed on local indices).
- ☐ A search of any information or records held by all other federal or other law enforcement databases.

Level 3

- ☐ A search of social networking websites, blogs, chatrooms, email or other content.
- ☐ A search of financial credit history.

Level 4

- ☐ Fingerprint search of criminal convictions from RCMP National Repository of Criminal Records (Identification Databank).
- ☐ A search from Canadian Border Services.
- ☐ Out of country criminal record search.

Level 5

- ☐ An interview and/or reference check.

Search results from Levels 2 – 5 searches to be disclosed as a result of the relevance of the search results to the purpose of the security screening, as determined by the OPP.

Applicant information

Last Name, First Name, and Middle Names				Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	
Maiden Name or other Last Names used			Name commonly used or other First Names		
Driver's Licence Number - (Mandatory where Level 1 check includes Ministry of Transportation Ontario check)					
Street Number and Name or Lot, Conc. And Township		Apt. No.	City, Town or Village	Province/State	Postal/ZIP Code
Date of Birth (YYYY/MM/DD)	Country of Birth	Telephone		E-mail address	

Your residence addresses for the past five (5) years (if different from above) - Add additional pages to this form if necessary

Street Number and Name or Lot, Conc. And Township	Apt. No.	City, Town or Village	Province/State	Postal/ZIP Code	From (MM/YY)	To (MM/YY)
Street Number and Name or Lot, Conc. And Township	Apt. No.	City, Town or Village	Province/State	Postal/ZIP Code	From (MM/YY)	To (MM/YY)
Street Number and Name or Lot, Conc. And Township	Apt. No.	City, Town or Village	Province/State	Postal/ZIP Code	From (MM/YY)	To (MM/YY)
Street Number and Name or Lot, Conc. And Township	Apt. No.	City, Town or Village	Province/State	Postal/ZIP Code	From (MM/YY)	To (MM/YY)
Street Number and Name or Lot, Conc. And Township	Apt. No.	City, Town or Village	Province/State	Postal/ZIP Code	From (MM/YY)	To (MM/YY)

Purpose of the record check (if other, please specify)		
<input type="checkbox"/> Employment <input type="checkbox"/> Student Placement <input type="checkbox"/> Contractor <input checked="" type="checkbox"/> Other: Contractor Licensee		
Description of position applied for: e.g. agency/organization working for, location, area working, supervisor name and contact information Ontario Energy Board - Contractor Licensee - 726 70 144 Access Level - _____ (OPP contractor hiring managers - see OPP Contractor Screening in Security Enquiries Unit web site regarding access levels)		
Third Party Disclosure		
I hereby consent to full disclosure, by the OPP to the person(s) listed below, of all personal information about myself responsive to this security screening check. This consent includes the release of records requested. This consent is given pursuant to section 42(b) of the <i>Freedom of Information and Protection of Privacy Act</i> .		
Last Name, First Name Anderson, Lynne	Title of Position Managing Director	
Name of organization/agency Ontario Energy Board		
Release, Discharge and Consent		
The undersigned hereby authorizes the Ontario Provincial Police (OPP) to conduct a security screening check about myself.		
I hereby authorize the OPP to collect personal information about me from third parties. Specifically, I consent to full disclosure to the OPP by any police service, employer, organization, business or person to whom a signed copy of this consent or a photocopy or fax thereof is delivered, of any information, opinions, reports, records, documents or copies thereof, in any form which may be requested.		
I understand that all information about me that is obtained during this security screening check may be used or disclosed by the OPP to my organization/agency, for the purpose of making a decision with respect to my security clearance or for a consistent purpose.		
I acknowledge that records and/or information is obtained based on a name search and as a result may or may not pertain to me. I understand that positive identification may only be confirmed through comparison of fingerprints, which must be submitted by me. The OPP cannot be held responsible for the completeness or accuracy of information it receives from third parties.		
I additionally acknowledge that the purpose of the security screening check is to allow the agency/organization requesting this check to make a determination as to whether I am eligible to perform services for the agency/organization, that this determination is made by the agency/organization, acting within its sole discretion, and that the determination is required to mitigate risk to agency/organization's personnel and property.		
I hereby release and forever discharge Her Majesty the Queen in Right of Ontario, the Commissioner of the OPP and all members, agents, and employees of the OPP from any and all actions, claims and demands for damages, loss or injury howsoever arising which may hereafter be sustained by myself as a result of the collection and/or disclosure of information by the OPP as authorized by this security screening check. This release and discharge shall apply to and be binding on my heirs, administrators, executors and assigns.		
By signing below, I confirm I have read this form, that I am at least eighteen (18) years of age, and that I have read and I understand the contents of the <i>Security Screening Check – Information for the Applicant</i> document. I understand what level of security screening check I am consenting to, what kinds of security screening result, and I fully consent to such a security screening check being conducted.		
<input type="checkbox"/> Form LE229 - Declaration of Criminal Record attached – if applicable.	Signature of Applicant I consent to a full or partial level 1 search.	Date (yyyy/mm/dd)
Identification – to be checked by organization/agency		
<input type="checkbox"/> Form checked for completeness and identity of applicant has been verified	Name of organization/agency Ontario Energy Board	
Telephone	Signature of organization/agency witness	Date (yyyy/mm/dd)
Date of Search (yyyy/mm/dd) Member ID and Signature		Total number of pages attached to this form

Not valid
 unless embossed by
 Ontario Provincial
 Police seal