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

Licence

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

Application for an Electricity Retailer





ONTARIO ENERGY BOARD

For Office Use Only		
Application Number	EB-2014-0136	
Date Received	March 10f/4	

1. The Applic	ant			
Legal Name of t	the Applicant :	Link Energy Supply inc.		
Name to Appear on Licence:		Link Energy Supply Inc.		
Indicate if	the name to appear	on the licence is the same as the legal name.		
Please note that include the legal	if the name to appe	ear on the licence is not the same as the legal name, the name on the licence must ant and the legal name must appear first. The "Name to Appear on Licence" will		
Business Classi	fication:			
C Sole Propriet	tor			
○ Partnership				
Corporation				
○ Other (descri	be)			
Date of formatio	n or incorporation:	September 19, 2012		
Place of formation	on or incorporation:	Montreal		
Province/state	Quebec			
Country	Canada			
• •	•	applicant must be at least 18 years old. e or she at least 18 years old?		
⊂ No				
Not applicab	le - not an individua	d		

2. Licence Primary Contact

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

	Last Name		First Name	Initial
Mr. • Mrs. C	Anthofer		Jeff	E
Miss C Ms. C	Title/Position			
Other C	Chief Operating Of	fficer		
	Company Name if	different from Name t	o Appear on Licence	
	Link Energy Suppl	y Inc.		
Licence Primary Contact	Address:			
5800 Ambler Drive, Suite	210-9			
City	Province/S	tate	Country	Postal/Zip Code
Mississauga	Ontario		Canada	L4W 4J4
Phone Number	Toll Free (if available)	Fax Number	E-mail Address	
(416) 312-6250		(855) 440-5465	jeff.anthofer@linkenergy.co	om
office in Ontario) as the a		ist 18 years old, or a c	corporation that has its head offi	ce or registered
	Last Name		First Name	Initial
Mr. C Mrs. C				
Miss C Ms. C	Title/Position			
Other C				
	Company Name if	different from Name t	o Appear on Licence	
Address for Service in O	ntario (if different than the	e Licence Primary Co	ntact Address above)	
City		Province	Postal Code	
		ONTARIO		
Phone Number	Toll Free (if available)	Fax Number	E-mail Address	

ა.	Application	Primary	Contact	

Indicate if same as above. If yes, proceed to s		4	Indicate if sam	ie as above	. If ves. p	roceed to	section 4.
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The primary contact for the licence application may be a person within the applicant's organization other than the licence primary contact noted above. An applicant may also choose to designate a consultant, lawyer, etc. to be the primary contact for the licence application. The Board will communicate with this person during the course of the application but with the licence primary contact after a licence is issued.

Mr. C	Mrs. ←	Last Name	First Name	Initial [
Miss C	Ms. ○	Title/Position		
Other C			***************************************	
		Company Name if different t	from Name to Appear on Licence	
Application P	rimary Conta	act Address:		
City		Province/State	Country	Postal/Zip Code
Phone Numb	er	Toll Free (if available) Fax Nun	nber E-mail Address	

4. Customer Complaint or Inquiries Primary Contact

Provide contact information of the person to whom correspondence or communication regarding customer complaints or inquiries should be addressed. The mailing address should be in Ontario and the telephone number should be listed in Ontario. If the applicant intends to retail electricity to low-volume consumers (annually consuming less than 150,000 kilowatt hours of electricity), the applicant should also provide a telephone number which may be reached by the general public without a charge.

Mr. 📀	Mrs. ←	Last Name Anthofer		First Name Jeff	Initial
Miss C	Ms. ←	Title/Position			
Other C		Chief Operating O	fficer	_	
		Company Name if	different from Name to	Appear on Licence	
		Link Energy Supp	ly Inc.		
Customer Co	omplaint or Inqu	uiries Primary Contact	Address:		
5800 Ambler	Drive, Suite 21	10-9			
City			Province	Postal Code	
Mississauga			ONTARIO	L4W 4J4	
Phone Numb	per To	oll Free	Fax Number	E-mail Address	
(416) 312-62	250		1 (855) 444-5465	jeff.anthofer@linkene	ergy.com

5. I	ype of Application		
(•)	lew licence		
$\subset F$	Renewal, please provide the licence r	number and expiry date of the existing licence	
	Licence Number: ER-	Expiry Date:	
6. T	rade Names		
	*	the licensee to conduct business using the name names by the licensed electricity retailer.	e under which the licence is
Doe	s the applicant intend to use trade na	ames?	
	Yes, provide a list of trade nam	nes the applicant intends to use in the space pro	vided below.
	No, proceed to 7.		
L			
ļ		**************************************	
7. <i>i</i>		applicant, or an associated entity (e.g., a partner	
	ever been licensed by the Ontario Enfound at www.e-laws.gov.on.ca).	nergy Board? (the <i>Business Corporations Act</i> de	efinition for affiliate can be
	Yes, provide details of current a No, proceed to 7(b).	and expired licences in the table below.	
	Licensee Name	Relation to the applicant (e.g., applicant itself, affiliate, partneretc.)	Licence Number
-			
1			

have any other a	nt, an affiliate of the appi pplication(s) before the 0 ide details in the table be	Ontario Energy Board?	entity (e.g., a par	inership d	or limited partnership)
No, proce	ed to 7(c).				
Applicant	Name	Type of Application	on C		ergy Board File Number if applicable)
	MCC007000000000000000000000000000000000			<u> </u>	
• •	t, an affiliate of the applic			•	
	e details of current and e	xpired licences in the tal	ole below		
Company Name	Jurisdiction	Business Activity	Name of Licen	sing Body	Licence/Registration No.
Link Energy Supply Inc	. Alberta	Electricity Retailer	Services Albert	a	337994
8 Officers Direc	tors and Key Individ	luale		***************************************	<u></u>
	a corporation, provide a		a list of all office	rs and dir	rectors, including name
following function	ey individuals below. The s for the applicant: regul luals may include the Ch	atory requirements and o	conduct, financia	I matters	and technical matters.
, ,	t a minimum of three ke	ey individuals. If unabl	e to provide a n	ninimum	of three, please
Name	of Key Individual	Tit	•		t's business (or identify
Wayne Burke		Presid		it the app	licant's business)
Steve Shoiry			resident		
Matt Sherrett			Financial Officer		
Jeff Anthofer			Chief Operating Officer		

9. Intended Services and Markets (a) Intended Services: please identify which of the following services the applicant intends to offer. You may select as many as applicable.

	many as applicable.
\boxtimes	to sell or offer to sell electricity to low-volume consumers (annually consuming less than 150,000 kilowatt hours of electricity) in Ontario.
X	to sell or offer to sell electricity to large-volume consumers (annually consuming more than 150,000 kilowatt hours of electricity) in Ontario.
	to act as an agent or broker for a retailer with respect to the sale or offering for sale of electricity to large-volume consumers, or as an agent or broker for large-volume consumers with respect to the sale or offering for sale of electricity in Ontario.
	to act as an agent or broker for a retailer with respect to the sale or offering for sale of electricity to low-volume consumers, or as an agent or broker for low-volume consumers with respect to the sale or offering for sale of electricity in Ontario.
s the	applicant currently providing any of the above listed services?
	Yes, provide a list of the services the applicant is currently providing.
\boxtimes	No, indicate when the applicant intends to provide these services.
	March 2014
(b)	Wholesale Market Participation: does the applicant intend to operate in the IESO-administered markets and settle bilateral contracts through the IESO?
	Yes
\boxtimes	No, please explain how the applicant intends to participate.
(c)	Retail Market Participation: does the applicant intend to settle the wholesale market cost of electricity consumed by its customers through a distributor's settlement system?
\boxtimes	Yes
	No, please explain how the applicant intends to participate.