Ontario Energy Board P.O. Box 2319 2300 Yonge Street 27th 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 27e étage Toronto ON M4P 1E4 Téléphone: 1-888-632-6273 Télécopieur: (416) 440-7656





Application for an Electricity Retailer ENERGY BO Application Number Licence

For Office Use Only

Application Number EB - 2015 - 0362

Date Received Dec. 11/15

1. The Applica	ınt			
Legal Name of the Applicant :		McMaster University		
Name to Appear on Licence:				
Indicate if the name to appear on the licence is the same as the legal name.				
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.				
Business Classifi	cation:			
○ Sole Proprieto	or			
○ Partnership				
Corporation				
Other (described)	not-for-pro	ofit		
Date of formation or incorporation:		1887		
Place of formation or incorporation:		Toronto		
Province/state	Ontario			
Country	untry			
If the applicant is		applicant must be at least 18 years old. e or she at least 18 years old?		
○ Yes ○ No				
Not applicable - not an individual				

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.	Emberson		Joe		
Miss C Ms. C	Title/Position				
Other C		ering Operations			
	Other C Director of Engineering Operations Company Name if different from Name to Appear on Licence				
	Company Hamon	amorone nom reame	to Appear on License		
Licence Primary Contact A					
1280 Main Street West, CS					
City	Province/S	State	Country	Postal/Zip Code	
Hamilton	ON		Canada	L8S 4M3	
Phone Number T	oll Free (if available)	Fax Number	E-mail Address		
(905)525-9140 x24409		905-572-6990	embers@mcmaster.ca		
individual who is a resident of Ontario and is at least 18 years old, or a corporation that has its head office or registered office in Ontario) as the address of service.					
	Last Name		First Name	Initial	
Mr. C Mrs. C					
Miss C Ms. C Title/Position					
Other C					
Company Name if different from Name to Appear on Licence					
Address for Service in Ontario (if different than the Licence Primary Contact Address above)					
City		Province	Postal Code		
		ONTARIO			
Phone Number T	oll Free (if available)	Fax Number	E-mail Address		

3. Application Primary Contact				
Indicate if same as above. If yes, proceed to section 4.				
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.				
	Last Name	First Name	Initial	
Mr. O Mrs. O				
Miss C Ms. C	_Title/Position			
Other C				
	Company Name if different from Name	to Appear on Licence		
Application Primary Contact	Address:			
City	Province/State	Country	Postal/Zip Code	
Phone Number To	ell Free (if available) Fax Number	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. C. Mrs. C.	Last Name	First Name	Initial	
Mr. • Mrs. C	Naeem	Shahid		
	Title/Position			
Other C Manager, Energy Management and Sustainability				
	Company Name if different from Name to Appear on Licence			
-				
Customer Complaint or Inquiries Primary Contact Address:				
1280 Main St W, CSB 102				
City	Province	Postal Code		

ONTARIO

Fax Number

L8S 4M3

E-mail Address

naeemsh@mcmaster.ca

Hamilton

Phone Number

(905)525-9140 x27517

Toll Free

5. Type of Application				
○ New licence				
• Renewal, please provide the licence nu	mber and expiry date of the existing licence			
Licence Number: ER- 2011-0034	Expiry Date: May 5, 2016			
6. Trade Names				
The electricity retailer licence authorizes the held. It also provides for the use of trade na	e licensee to conduct business using the name ames by the licensed electricity retailer.	e under which the licence is		
Does the applicant intend to use trade name	nes?			
Yes, provide a list of trade name	s the applicant intends to use in the space pro	vided below.		
No, proceed to 7.				
115				
 7. Applicant's Licensing Status and History (a) Has the applicant, an affiliate of the applicant, or an associated entity (e.g., a partnership or limited partnership) ever been licensed by the Ontario Energy Board? (the Business Corporations Act definition for affiliate can be found at www.e-laws.gov.on.ca). 				
Yes, provide details of current and expired licences in the table below.No, proceed to 7(b).				
Licensee Name	Relation to the applicant (e.g., applicant itself, affiliate, partneretc.)	Licence Number		

(b)	Does the applicant, an affiliate of the applicant, or an associated entity (e.g., a partnership or limited partnership) have any other application(s) before the Ontario Energy Board?					
	Yes, provide details in the table below.					
	No, proceed	i to 7(c).				
	Applicant Name		Type of Application		Ontario Energy Board File Number (if applicable)	
(c)		an affiliate of the applic				
	Yes, provide o	details of current and e	xpired licences in	the table below		
	Company Name	Jurisdiction	Business Ac	tivity Name o	f Licensing Body	Licence/Registration No.
8.	Officers, Directo	ors and Key Individ	luals			
(a)	If the applicant is a and title.	corporation, provide as	s a separate attac	hment a list of al	l officers and dir	ectors, including name
(b)	(b) Provide a list of key individuals below. The individuals listed must be the individuals that are responsible for the following functions for the applicant: 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 and proprietors.					
	Note: Please list a explain.	a minimum of three ke	ey individuals. If	unable to prov	ide a minimum	of three, please
_	(-			Title (1 14) - 11		Un broning on the state.
	Name o	f Key Individual		Title/position within applicant's business (or identify company if not the applicant's business)		
Ro	ger Couldrey			Vice-President (Administration)		
Dr.	Dr. Mohamed Attalla			AVP & Chief Facilities Officer		
Joe Emberson			Director of Engineering Operations			

9. Ir	ntended 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.
	to sell or offer to sell electricity to low-volume consumers (annually consuming less than 150,000 kilowatt hours of electricity) in Ontario.
\boxtimes	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.
Is the	e applicant currently providing any of the above listed services?
\boxtimes	Yes, provide a list of the services the applicant is currently providing.
	Provide electricity at cost to the McMaster University Medical Centre
	No, indicate when the applicant intends to provide these services.
(b)	Wholesale Market Participation: does the applicant intend to operate in the IESO-administered markets and settle bilateral contracts through the IESO?
\boxtimes	Yes
	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?
	Yes
\boxtimes	No, please explain how the applicant intends to participate.
	McMaster University Medical Centre buys electricity at cost since it is connected to the grid
	through McMaster University

(g) I understand and acknowledge that, as a licensed electricity retailer, I must enter into a service agreement with the distributor before registering customers in a distributor's service area.

Name	Signature	Date
Roger Couldrey	Tuanan	81415
Dr. Mohamed Attalla	M. Attall	Dec 8/15
Joe Emberson	Vie Ehm	Dec 5/15

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)