Ontario Energy 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 Z7e étage
Toronto ON M4P 1E4
Téléphone: 1-888-632-6273
Télécopieur: (416) 440-7656





# **Application for a Gas Marketer Licence**

For Office Use Only Application Number Date Received

1. The Applica	ant				
Legal Name of t	he Applicant :	Bullfrog Power Inc.			
Name to Appear	on Licence:	Bullfrog Power Inc.			
Indicate if	the name to appear	on the licence is the same as the legal name.			
include the legal	if the name to appe name of the applica otice of application a	ear on the licence is not the same as the legal name, the name on the licence ant and the legal name must appear first. The "Name to Appear on Licence" and on the licence.	must will		
Business Classif	ication:				
○ Sole Propriet	or				
C Partnership					
Corporation					
C Other (describ	pe)				
Date of formation	or incorporation:	December 10, 2004			
Place of formatio	n or incorporation:	Toronto			
Province/state	Ontario				
Country	Canada				
• • • • • • • • • • • • • • • • • • • •	·	applicant must be at least 18 years old. or she at least 18 years old?			
	e - not an individual	I			

## 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.	Seftel		Ron	E		
Miss C Ms. C	Title/Position					
Other C	Chief Executive Of	fficer				
	Company Name if different from Name to Appear on Licence					
Licence Primary Contact	ct Address:					
366 Adelaide St W, Sui	te 701					
City	Province/S	tate	Country	Postal/Zip Code		
Toronto	Ontario		Canada	M5V 1R9		
Phone Number	Toll Free (if available)	Fax Number	E-mail Address			
416-360-3464 x 211	877-360-3464 x 211	416-360-8385	ron.seftel@bullfrogpower.co	om		
individual who is a resid	province of Ontario. Applicants whose offices are not located in Ontario may provide the address of an agent (an 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	15	First Name	Initial		
Mr. O Mrs. O						
Miss C Ms. C	Title/Position					
Other C	<b>→</b> :					
	Company Name if	different from Name to	Appear on Licence	<u> </u>		
Address for Service in Ontario (if different than the Licence Primary Contact Address above)						
				J <sub>e</sub>		
City		Province	Postal Code			
		ONTARIO				
Phone Number	Toll Free (if available)	Fax Number	E-mail Address			
1						

3. Application Primary Contact	ontac	<sup>,</sup> Coi	<b>Primary</b>	plication	}. Ap∣	3
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$\boxtimes$	Indicate if same as above.	If ves.	proceed t	o section 4
I/N	indicate il same as above.	II yoo,	proceed t	0 36611011 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.

Mr. C	Mrs. C	Last Name	First Name	Initial
Miss C	Ms. C	Title/Position		
Other C		Company Name if different for	no Nama As Assessant Liverage	
		Company Name if different fro	om Name to Appear on Licence	
Application F	Primary Contact	nt Addrage:		
Application	Timaly Conta	Li Addiess.		
City		Province/State	Country	Postal/Zip Code
Phone Numb	ber T	oll Free (if available) Fax Numb	er 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 which may be reached by the general public without a charge.

Mr.  Miss  Other	Mrs. O	Last Name Seftel Title/Position Chief Executive O Company Name it		First Name Ron Appear on Licence	Initial E
Customer Complaint or Inquiries Primary Contact Address:					
366 Adelaide St W, Suite 701					
City			Province	Postal Code	=
Toronto			ONTARIO	M5V 1R9	
Phone Numbe	r	Toll Free	Fax Number	E-mail Address	
416-360-3464	x 211	877-360-3464 x 211	416-360-8385	ron.seftel@bullfrogpower.com	

5. Type of Application					
○ New licence					
• Renewal, please provide the licence number and expiry date of the existing licence					
Licence Number: GM- 2011-0064 Expiry Date: May 29, 2016					
6. Trade Names					
It also provides for the use of trade names	censee to conduct business using the name ur by the licensed gas marketer.	nder which the licence is held.			
Does the applicant intend to use trade nan	nes?				
Yes, provide a list of trade name	es the applicant intends to use in the space pro	vided below.			
No, proceed to 7.					
Bullfrog Power					
	*1				
7 Annilosofia Lisando Otal					
7. Applicant's Licensing Status a	na History				
	pplicant, or an associated entity (e.g., a partne ergy Board? (the <i>Business Corporations Act</i> de				
Yes, provide details of current a	nd 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					
Bullfrog Power	applicant itself	ER-2015-0022			
Bullfrog Power applicant itself EW-2015-0195					
Bullfrog Power applicant itself GM-2011-0064					

(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 to 7(c).						
	Applicant Name		Type of Application		III	rgy Board File Number f applicable)
(c)		an affiliate of the applicate consed energy sector ac				
	Yes, provide	details of current and ex	xpired licences in	the table below		
	Company Name	Jurisdiction	Business Ad	tivity Name	of Licensing Body	Licence/Registration No.
				_		
8.	Officers, Directo	ors and Key Individ	uals			
(a)	If the applicant is a and title.	corporation, provide as	a separate attac	chment a list of a	ll 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 minimum of three key individuals. If unable to provide a minimum of three, please explain.					
	Name o	f Key Individual			• • •	t's business (or identify licant's business)
Gre	eg Kiessling			Executive Chairman		
Ror	n Seftel			Chief Executive Officer		
Jef	f Wojcicki			Vice President, Finance		

# 9. Intended Services Intended Services: please identify which of the following services the applicant intends to offer. to sell or offer to sell gas to low-volume consumers (consuming 50,000m³ or less of natural gas per year) in Ontario. to act as an agent or broker for a gas marketer with respect to the sale or offering for sale of natural gas to low-volume consumers, or as an agent or broker for low-volume consumers with respect to the sale or offering for sale of natural gas in Ontario. Is the applicant currently providing any of the above listed services? Yes, provide a list of the services the applicant is currently providing.

Bullfrog's focus is on selling a biomethane (RNG) and is waiting for local Ontario supply to become available

No, indicate when the applicant intends to provide these services.

X

### 16. Notice

The Board is authorized, under section 4.14 of the *Ontario Energy 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 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.

### 17. Certification and Acknowledgement

- (a) I certify that the information contained in this application and in the documents provided are true and accurate.
- (b) I understand and acknowledge that, as a licensed natural gas marketer, I must provide information as the Board may require from time to time.
- (c) I understand and acknowledge that, as a licensed natural gas marketer, I may have to meet requirements to disclose information to consumers in accordance with any government regulation made or standard set by the Board.
- (d) I understand and acknowledge that, as a licensed natural gas marketer, I must enter into a service agreement with the gas distributor before registering customers in a distributor's franchise area.

Name	Signature	Date
Greg Kiessling, Executive Chairman	1365	San 21/16
Ron Seftel, Chief Executive Officer	DA	JANUARY 21, 2016.
Jeff Wojcicki, Vice President Finance	Jebah	JAN 21, 2016

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)