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MAR 31 2016

ONTARIO ENERGY BOARD

Ontario Energy  
Board  
P.O. Box 2318  
2300 Yonge Street  
27th Floor  
Toronto ON M4P 1E4  
Telephone: 1-888-832-8273  
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l'Ontario  
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2300, rue Yonge  
27<sup>e</sup> étage  
Toronto ON M4P 1E4  
Téléphone: 1-888-832-8273  
Télécopieur: (416) 440-7868



## Application for an Electricity Wholesaler Licence

For Office Use Only

|                    |               |
|--------------------|---------------|
| Application Number | EB- 2016-0124 |
| Date Received      | March 31/16   |

### 1. The Applicant

Legal Name of the Applicant : Algoma Tubes Inc

Business Classification:

☐ Sole Proprietor☐ Partnership☒ Corporation☐ Other (describe) \_\_\_\_\_

Date of formation or incorporation: \_\_\_\_\_

Place of formation or incorporation:

Province/State YukonCountry Canada

If the applicant is an individual, the applicant must be at least 18 years old. If the applicant is an individual, is he or she at least 18 years old?

☒ Yes☐ No☐ Not Applicable - not an individual

Head Office or Business Address of Applicant

200 Lambert St

City

Whitehorse

Province/State

Yukon

Country

Canada

Postal/Zip Code

Y1A 3T2

Phone Number

705-941-6757

Toll Free (if available)

E-mail Address

jkucher@tenaris.com

Website Address

www.tenaris.com

## 2. Application Type

☒ New

☐ Renewal, provide the licence number and expiry date of the current licence.

Licence Number \_\_\_\_\_ Expiry Date \_\_\_\_\_

## 3. Licence Primary Contact

The licensee shall designate a person who will act as primary contact with the OEB 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"/>  | Kucher              | James      | D       |
| Other <input type="radio"/>          |                            | Title/Position      |            |         |
|                                      |                            | Maintenance Manager |            |         |
|                                      |                            | Company Name        |            |         |
|                                      |                            | Algoma Tubes Inc    |            |         |

Licence Primary Contact Address:

547 Wallace Terrace ave

|                 |                |         |                 |
|-----------------|----------------|---------|-----------------|
| City            | Province/State | Country | Postal/Zip Code |
| Sault Ste Marie | Ontario        | Canada  | P6C 1L9         |

|              |                          |                     |
|--------------|--------------------------|---------------------|
| Phone Number | Toll Free (if available) | E-mail Address      |
| 705-941-6757 |                          | jkucher@tenaris.com |

## 4. Application Primary Contact

☒ Indicate if same as above. Proceed to section 5.

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 OEB will communicate with this person during the course of the application review process but with the licence primary contact after a licence is issued.

|                             |                            |                |            |         |
|-----------------------------|----------------------------|----------------|------------|---------|
| Mr. <input type="radio"/>   | Mrs. <input type="radio"/> | Last Name      | First Name | Initial |
| Miss <input type="radio"/>  | Ms. <input type="radio"/>  |                |            |         |
| Other <input type="radio"/> |                            | Title/Position |            |         |
|                             |                            |                |            |         |
|                             |                            | Company Name   |            |         |
|                             |                            |                |            |         |

**Application Primary Contact Address:**

|              |                          |                |                 |
|--------------|--------------------------|----------------|-----------------|
|              |                          |                |                 |
| City         | Province/State           | Country        | Postal/Zip Code |
|              |                          |                |                 |
| Phone Number | Toll Free (If available) | E-mail Address |                 |
|              |                          |                |                 |

**5. Trade Names**

The electricity wholesaler licence authorizes the licensee to conduct business using the name under which the licence is held (i.e. the applicant's legal name). It also provides for the use of trade names by the licensee.

Does the applicant intend to use trade names?

- ☒ Yes, provide a list of trade names the applicant intends to use in the space provided below.
- ☐ No, proceed to section 6.

Tenaris AlgomaTubes

Tenaris

AlgomaTubes

**6. 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 OEB? (The *Business Corporations Act* definition for affiliate can be found at [www.e-laws.gov.on.ca](http://www.e-laws.gov.on.ca))

- ☐ Yes, provide details of current and expired licences in the table below.
- ☒ No, proceed to 6(b).

| Licensee Name | Relation to the Applicant<br>(e.g., applicant itself, affiliate, partner...etc.) | Licence Number |
|---------------|----------------------------------------------------------------------------------|----------------|
|               |                                                                                  |                |
|               |                                                                                  |                |
|               |                                                                                  |                |
|               |                                                                                  |                |
|               |                                                                                  |                |

(b) Does the applicant, an affiliate of the applicant, or an associated entity have any other application(s) before the OEB?

☐ Yes, provide details in the table below.

☒ No, proceed to 6(c).

| Applicant Name | Relationship to this Applicant | Type of Application | OEB File Number |
|----------------|--------------------------------|---------------------|-----------------|
|                |                                |                     |                 |
|                |                                |                     |                 |
|                |                                |                     |                 |

(c) Has the applicant, an affiliate of the applicant, or an associated entity ever undertaken energy sector activity in any other jurisdiction within North America?

☐ Yes, provide details in the table below.

☒ No

| Company Name | Relation to the Applicant | Jurisdiction | Business Activity | Name of Licensing Body and Licence/Registration No. (if applicable) |
|--------------|---------------------------|--------------|-------------------|---------------------------------------------------------------------|
|              |                           |              |                   |                                                                     |
|              |                           |              |                   |                                                                     |
|              |                           |              |                   |                                                                     |

## 7. Key Individuals

In the table below, identify the key individuals that are responsible for executing the following functions for the applicant: matters related to regulatory requirements and conduct, financial matters, and technical matters. Key individuals include the Chief Executive Officer, the Chief Financial Officer, other officers and directors, partners or proprietors.

| Name of Key Individual | Title/Position within Applicant's Business (or identify company if not the Applicant's Business) |
|------------------------|--------------------------------------------------------------------------------------------------|
| Darren Flack           | Officer Chief Financial Officer                                                                  |
| David McHattie         | Officer Institutional Relations Director                                                         |
| Federico Batelli       | Operations Director                                                                              |

## 8. Intended Markets and Services

Identify the applicant's intended markets and services. Select any that apply.

- ☒ To purchase electricity or ancillary services in the IESO-administered markets.
- ☐ To purchase electricity or ancillary services directly from a generator.
- ☐ To sell electricity or ancillary services in the IESO-administered markets.
- ☐ To sell electricity or ancillary services to wholesalers.
- ☐ To sell electricity or ancillary services to distributors (i.e., standard supply services).
- ☐ To sell electricity or ancillary services to electricity retailers.
- ☐ To sell electricity or ancillary services to persons outside of the Ontario market.
- ☐ To sell electricity to consumers, defined as a person who uses for the person's own consumption, electricity that the person did not generate. If the applicant selects this item, the applicant may require a retailer licence. The application form can be found at [www.ontarioenergyboard.ca](http://www.ontarioenergyboard.ca).

## 14. Notice

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

The information provided both on this form and attached to this form is being collected by the OEB 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 OEB 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 OEB's determination of the application will be collected by the OEB.

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

## 18. 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 licensee, I must provide information as the OEB may require from time to time.
- (c) I understand and acknowledge that the issuance of an electricity wholesaler licence does not guarantee accreditation by the IESO or distributors.

|                                                                |                                                                                                                                                                                                            |                                        |
|----------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|
| Print Name of Key Individual<br>David McHattie<br>Darren Flack | Signature of Key Individual<br><br> | Date<br>11 March 2016<br>11 March 2016 |
|----------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|

If the applicant is a sole proprietor, he/she must sign.

If the applicant is a corporation, a person with authority to bind the corporation must sign.

If the applicant is a partnership, a partner with authority to sign on behalf of the partnership must sign.

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|                                                          |                                                                                                                    |                        |
|----------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|------------------------|
| Print Name of Key Individual<br><b>FEDERICO LATTELLI</b> | Signature of Key Individual<br> | Date<br><b>3/11/16</b> |
|----------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|------------------------|

**If the applicant is a sole proprietor, he/she must sign.**

**If the applicant is a corporation, a person with authority to bind the corporation must sign.**

**If the applicant is a partnership, a partner with authority to sign on behalf of the partnership must sign.**