RECEIVED

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

AUG - 8 1445 ENTARIO EMERSY BOARD



Application for an Electricity Retailer Licence

For Office Use Only

Application Number

EB - 2016 - 0240

Date Received

Our 8/16

1. The Applica	nt		
Legal Name of th	ne Applicant :	GreenField Specialty Alcohols Inc.	
Name to Appear	on Licence:	GreenField Specialty Alcohols Inc.	
Indicate if the	ne name to appear	on the licence is the same as the legal name.	
include the legal r		ear on the licence is not the same as the legal name, the name on the lic ant and the legal name must appear first. The "Name to Appear on Lice and on the licence.	
Business Classific	cation:		
C Sole Proprieto	or		
Partnership			
Corporation			
Other (describ	e)		
Date of formation	or incorporation:	06/27/1991	
Place of formation	or incorporation:	Toronto	
Province/state	Ontario		
Country	Canada		
		applicant must be at least 18 years old. e or she at least 18 years old?	
○ Yes			
○ No			
Not applicable	e - not an individua	ıl everinde	

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.	Kean	Ron	
Miss O Ms. O	Title/Position		
Other (Vice President and General Co	unsel	
	Company Name if different from		
icence Primary Contact A	ddraes.		
20 Toronto Street, Suite14			
	Province/State	Country	Postal/Zip Code
City Toronto	Ontario	Canada	M5C2B8
			12
	Oli 1 100 (ii di dididicio)	70 70 70 70 70 70 70 70 70 70 70 70 70 7	
(416) 304-1700 x8527	(416) 304-1	1701 Ion.kean@gisa.com	
revines of Ontario Applica	ants whose offices are not located it	provide contact information for service n Ontario may provide the address of old, or a corporation that has its head	an agent (an
revines of Ontario Applica	ants whose offices are not located in of Ontario and is at least 18 years dress of service.	n Ontario may provide the address of old, or a corporation that has its head	office or registered
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orovince of Ontario. Applicate and ordividual who is a resident office in Ontario) as the add office in Ontario. Mrs. Mrs. Mrs. Mrs. Other Address for Service in Ontario.	ants whose offices are not located it of Ontario and is at least 18 years dress of service. Last Name Title/Position Company Name if different fro	First Name Mame to Appear on Licence Primary Contact Address above) Postal Code	office or registered

3. Application Prim	ary Contact			
Indicate if same as	above. If yes, proceed to	section 4.		
primary contact noted all contact for the licence a	bove. An applicant may a	llso choose to designa communicate with thi	he applicant's organization of te a consultant, lawyer, etc. s person during the course	to be the primary
	Last Name		First Name	Initial
Mr. C Mrs. C				
Miss C Ms. C	Title/Position			
Other O				
	Company Name it	f different from Name t	to Appear on Licence	
Application Primary Cor	ntact Address:			
City	Province/S	State	Country	Postal/Zip Code
Phone Number	Toll Free (if available)	Fax Number	E-mail Address	
Provide contact informatinquiries should be addr Ontario. If the applicant	essed. The mailing addre intends to retail electricity	n correspondence or c ess should be in Ontar / to low-volume consu	communication regarding cu io and the telephone numbe mers (annually consuming l ne number which may be re	er should be listed in ess than 150,000
	Last Name		First Name	Initial
Mr. Mrs.	Bland		Brendan	
Miss C Ms. C	Title/Position			
Other C	Plant Manager			
	Company Name it	f different from Name	to Appear on Licence	
Customer Complaint or	Inquiries Primary Contac	t Address:		
141 Commerce Drive			N .	
City		Province	Postal Code	
Johnstown		ONTARIO	K0E1T1	
Phone Number	Toll Free	Fax Number	E-mail Address	

(613) 925-1292

(613) 925-1385 x7716

brendan.bland@gfsa.com

5. Type of Application		
New licence		
C Renewal, please provide the licence n	umber and expiry date of the existing licence	
Licence Number: ER-		
	· · · · · · · · · · · · · · · · · · ·	
6. Trade Names		
The electricity retailer licence authorizes theld. It also provides for the use of trade retails.	he licensee to conduct business using the nam names by the licensed electricity retailer.	e under which the licence is
Does the applicant intend to use trade nat	mes?	
Yes, provide a list of trade name	es the applicant intends to use in the space pro	vided below.
No, proceed to 7.		
L		
	-14	
 7. Applicant's Licensing Status a (a) Has the applicant, an affiliate of the a ever been licensed by the Ontario Enfound at www.e-laws.gov.on.ca). 	nd History pplicant, or an associated entity (e.g., a partne ergy Board? (the Business Corporations Act de	rship or limited partnership) efinition for affiliate can be
Yes, provide details of current a No, proceed to 7(b).	nd expired licences in the table below.	
Licensee Name	Relation to the applicant (e.g., applicant itself, affiliate, partneretc.)	Licence Number
-		

(b)	Does the applicant	t, an affiliate of the applic olication(s) before the Or	cant, or an associ	ciated ent	tity (e.g., a	partnership o	r limited partnership)
		e details in the table belo					
	No, proceed	d to 7(c).					
Applicant Name		ame	Type of Application			Ontario Energy Board File Number	
						(f applicable)
(c)		an affiliate of the applica ensed energy sector act					
	☐ Yes, provide☐ No	details of current and ex	pired licences in	the table	e below		
	Company Name	Jurisdiction	Business Ac	tivity	Name of Li	censing Body	Licence/Registration No.
							<u> </u>
8.	Officers, Directo	ors and Key Individu	ıals				
(a)	If the applicant is a and title.	corporation, provide as	a separate attac	hment a	list of all of	ficers and dire	ectors, including name
(b)	following functions	y individuals below. The for the applicant: regulated als may include the Chie	ory requirement	s and coi	nduct, finar	icial matters a	and technical matters.
	Note: Please list a explain.	n minimum of three key	individuals. If	unable t	to provide	a minimum	of three, please
	-						
	Name of	f Key Individual		l itle/	-		's business (or identify icant's business)
Rol	bert Gallant			Chief Ex	ecutive Off	icer	
Mal	Icolm West			Chief Fir	nancial Offi	cer	**
Da۱	ve Salt			Vice Pre	sident, Cor	porate Engin	eering

9. I	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?
	Yes, provide a list of the services the applicant is currently providing.
\boxtimes	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?
	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
	No, please explain how the applicant intends to participate.

(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
Ron Kean	Let L	JULY 21, 2016
Robert Gallant	R. 5. fillat	JULY 21, 2016
Malcolm West	Milion	July 21, 2016
Dave Salt	Develop	July 292016

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)