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RECEIVED  
FEB 28 2017  
ONTARIO ENERGY BOARD



## Application for an Electricity Generation Licence Feed-in Tariff Program

For Office Use Only	
Application Number	EB- 2017-0120
Date Received	Feb. 28/17

### 1. The Applicant

Legal Name of the Applicant : Windlectric Inc.

Business Classification:

☐ Sole Proprietor

☐ Partnership

☒ Corporation

☐ Other (describe) \_\_\_\_\_

Date of formation or incorporation: June 26, 2008

Place of formation or incorporation:

Province/State Ontario

Country Canada

Head Office or Business Address of Applicant

354 Davis Road Suite 100

City	Province/State	Country	Postal/Zip Code
<u>Oakville</u>	<u>Ontario</u>	<u>Canada</u>	<u>L6J2X1</u>

Phone Number	Toll Free (if available)	E-mail Address
<u>9054654514</u>		

Website Address www.algonquinpower.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 type="radio"/>	Mrs. <input type="radio"/>	Last Name	First Name	Initial
Miss <input type="radio"/>	Ms. <input checked="" type="radio"/>	Jehn	Laura	
Other <input type="radio"/>		Title/Position		
		VP Asset Management		
		Company Name		
		Algonquin Power		

Licence Primary Contact Address:

354 Davis Road

City	Province/State	Country	Postal/Zip Code
Oakville	Ontario	Canada	L6J2X1

Phone Number	Toll Free (if available)	E-mail Address
2892187719		laura.jehn@algonquinpower.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 checked="" type="radio"/>	Mrs. <input type="radio"/>	Last Name	First Name	Initial
Miss <input type="radio"/>	Ms. <input type="radio"/>	Bautista	Ariel	
Other <input type="radio"/>		Title/Position		
		Project Manager		
		Company Name		
		Algonquin Power		

Application Primary Contact Address:

354 Davis Road

City	Province/State	Country	Postal/Zip Code
Oakville	Ontario	Canada	L6J2X1

Phone Number	Toll Free (if available)	E-mail Address
2899810171		ariel.bautista@algonquinpower.com

## 5. Trade Names

The electricity generation 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.


## 6. Applicant's Licensing Status and History

(a) Has the applicant ever been licensed by the OEB?

- ☐ Yes, provide details of current and expired licences in the table below.
- ☒ No

Licensee Name	Licensee's Address	Licence Number

(b) Has the applicant ever had an energy market related licence or registration in Ontario and/or other jurisdiction within North America refused, suspended, revoked or cancelled?

- ☐ Yes, provide details

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- ☒ No

## 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)
Ian Robertson	Director, Chief Executive Officer, President
David Bronicheski	Director, Chief Financial Officer, Secretary, Treasurer

## 8. Generation Facilities

Is the applicant applying to be licensed for more than one facility?

- ☐ Yes. Make a copy of **sections 8,9 and 10 of this application form** and provide information for each additional facility as an attachment.
- ☒ No

a) Generation Type:    ☐ Biogas                                      ☐ Biogas (On-Farm)                                      ☐ Landfill Gas  
                                 ☐ Renewable Bio-Mass                                      ☐ Solar PV (Rooftop)                                      ☐ Solar PV (Ground Mount)  
                                 ☐ Wind (Off-Shore)                                      ☒ Wind (On-Shore)                                      ☐ Waterpower

Gross Nameplate Capacity 74.112    ☐ kW    ☒ MW

Expected Commercial Operation Date 1-Apr-18

Facility Name    Amherst Island Wind Project

Facility Address    Amherst Island, Stella ON, K0H2S0

b) Does/will the applicant own and operate any of the following (check any that apply):

i) A distribution line that is used to distribute electricity within the generation facility described in section 8 a) or from that facility to the distribution system of a Local Distribution Company?

- ☒ Yes, provide length of the distribution line in kilometres    34.5
- ☐ No

ii) A transmission line that is used to distribute electricity within the generation facility described in section 8a) or from that facility to the IESO-controlled grid?

- ☒ Yes, provide length of the transmission line in kilometres    5.7
- ☐ No

iii) A transformer station or distribution station that is used to transform the voltage of electricity at the generation facility described in section 8a), on a transmission line or on the distribution system of a Local Distribution Company?

- ☒ Yes
- ☐ No

c) Responsibilities of Applicant:

☒ Owner and Operator

☐ Operator only, please indicate if you are leasing the facility and identify owner \_\_\_\_\_

☐ Owner only, please identify lessee/operator \_\_\_\_\_

If you are applying for only one of the two qualifications, please provide information on the status of the other qualification. The information should include confirmation as to whether or not the person or entity seeking the other qualification is licensed; if licensed, please provide the licence number, and if not, indicate when an application for the other qualification will be filed with the OEB:

\_\_\_\_\_  
\_\_\_\_\_

## 9. Feed-in Tariff Program Contract and Notice to Proceed

Provide details regarding FIT contract with the IESO and Notice to Proceed

FIT Reference #: FIT - FUT3N0X

Contract Date: February 25, 2011

Date Notice to Proceed was received: 26-Jan-17

**Note: The application cannot be processed until the IESO issues a Notice to Proceed for the project.  
A copy of the Notice to Proceed must be submitted with your application.**

## 10. Connection

a) Will the generation facility be connected to a Local Distribution Company?

☐ Yes, identify the Local Distribution Company and the connection point (i.e. feeder name, name of transformer station or distribution station to which the feeder is connected)

☒ No

b) Will the generation facility be connected to a Host Facility?

☐ Yes, identify the Host Facility and the connection point (i.e. name of Local Distribution Company or name of Transmitter serving Host Facility, name of feeder or circuit connecting Host Facility, name of transformer station or name of switching station, name of transformer or distribution station to which the feeder is connected)

☒ No

c) Will the generation facility be connected to a transmission system (the IESO-controlled grid)?

☒ Yes, identify the connection point (i.e. name of circuit, name of transformer or switching station)

Hydro One 115kV Q6S Circuit (-44.2088 N, 76.7201 W)

☐ No

If the applicant has answered "No" to a), b) and c), explain how the applicant intends to connect the project.

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## 11. 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:

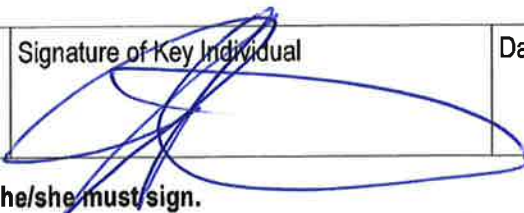
Board Secretary  
Ontario Energy Board  
P.O Box 2319  
2300 Yonge Street, 27<sup>th</sup> Floor  
Toronto, ON  
M4P 1E4

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.

## 12. 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, as a licenced electricity generator, I must enter into agreements with the distributor or transmitter to whom my facilities are connected.

Print Name of Key Individual IAN COOPERSON	Signature of Key Individual 	Date FEB 24 / 17
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**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.**

**Checklist (return with application form)**

- ☐ Two copies of the application form have been included with original signature on both copies
- ☐ A cheque or money order for the non-refundable application fee has been included
- ☐ A copy of the Notice to Proceed has been included