

Ontario Energy  
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l'Ontario  
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MAR 20 2019  
ONTARIO ENERGY BOARD



## Application for an Electricity Retailer Licence

For Office Use Only	
Application Number	EB - 2018-0134
Date Received	

### 1. The Applicant

Legal Name of the Applicant : Ontario Wholesale Energy LV Inc.

Name to Appear on Licence: Ontario Wholesale Energy LV Inc.

☒ 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 Classification:

☐ Sole Proprietor

☐ Partnership

☒ Corporation

☐ Other (describe) \_\_\_\_\_

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

Place of formation or incorporation: Toronto

Province/state Ontario

Country 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

## 2. Licence Primary Contact

As a condition of licensing, 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"/> Miss <input type="radio"/> Ms. <input type="radio"/> Other <input type="radio"/> _____	Last Name	First Name	Initial
	Mulcahy	Tim	
	Title/Position		
	CEO		
Company Name if different from Name to Appear on Licence			
Licence Primary Contact Address:			
2 Bloor St W., Suite 2700			
City	Province/State	Country	Postal/Zip Code
Toronto	Ontario	Canada	M4W 3E2
Phone Number	Toll Free (if available)	Fax Number	E-mail Address
416-307-2461	1-844-604-7283	1-855-344-1722	tim.mulcahy@owenergy.com

If the above address is not in Ontario, the applicant must also provide contact information for service purposes in the 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.

Mr. <input checked="" type="radio"/> Mrs. <input type="radio"/> Miss <input type="radio"/> Ms. <input type="radio"/> Other <input type="radio"/> _____	Last Name	First Name	Initial
	Title/Position		
Company Name if different from Name to Appear on Licence			
Address for Service in Ontario (if different			
City	Province	Postal Code	
	ONTARIO		
Phone Number	Toll 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.

Mr. <input type="radio"/>	Mrs. <input type="radio"/>	Last Name	First Name	Initial
Miss <input type="radio"/>	Ms. <input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other <input type="radio"/>	<input type="text"/>	Title/Position	<input type="text"/>	
		Company Name if different from Name to Appear on Licence	<input type="text"/>	
Application Primary Contact Address:				
<input type="text"/>				
City	Province/State	Country	Postal/Zip Code	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Phone Number	Toll Free (if available)	Fax Number	E-mail Address	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	

### 4. Customer Complaint or Inquiries Primary Contact

Provide contact information of the person to whom correspondence

Mr. <input checked="" type="radio"/>	Mrs. <input type="radio"/>	Last Name	First Name	Initial
Miss <input type="radio"/>	Ms. <input type="radio"/>	Shulman	Morley	<input type="text"/>
Other <input type="radio"/>	<input type="text"/>	Title/Position	<input type="text"/>	
		Director, Customer Excellence & Compliance		
		Company Name if different from Name to Appear on Licence	<input type="text"/>	
Customer Complaint or Inquiries Primary Contact Address:				
2 Bloor St W., Suite 2700				
City	Province	Postal Code		
Toronto	ONTARIO	M4W 3E2		
Phone Number	Toll Free	Fax Number	E-mail Address	
416-307-2474	1-844-604-7283	844.378.7711	morley.shulman@ownenergy.com	

## 5. Type of Application

- ☒ New licence  
☐ Renewal, please provide the licence number and expiry date of the existing licence

Licence Number: ER- \_\_\_\_\_ Expiry Date: \_\_\_\_\_

## 6. Trade Names

The electricity retailer licence authorizes the licensee to conduct business using the name under which the licence is held. It also provides for the use of trade names by the licensed electricity retailer.

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 7.


## 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) *Business Corporations Act* [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 7(b).

Licensee Name	Relation to the applicant (e.g., applicant itself, affiliate, partner...etc.	Licence Number
Onit Energy Ltd	APPLICANT ITSELF	ER-2015-0157

- (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 OEB?

☒ Yes, provide details in the table below.

☐ No, proceed to 7(c).

Applicant Name	Type of Application	Ontario Energy Board File Number (if applicable)
Ontario Wholesale Energy LV Inc.	Gas Retail Marketer	

- (c) Has the applicant, an affiliate of the applicant, or an associated entity (e.g., a partnership or limited partnership) ever undertaken licensed energy sector activity in any other jurisdiction within North America?

☐ Yes, provide details of current and expired licences in the table below

☒ No

Company Name	Jurisdiction	Business Activity	Name of Licensing Body	Licence/Registration No.

## 8. Officers, Directors and Key Individuals

- (a) If the applicant is a corporation, provide as a separate attachment a list of all officers and directors, including name and title.
- (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.**

**explain** \_\_\_\_\_

Name of Key Individual	Title/position within applicant's business (or identify company if not the applicant's business)
Timothy Mulcahy	CEO
David Balaban	President & COO
Greg Carey	Director, Finance
Morley Shulman	Director Customer Experience & Compliance

9.

(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.
- ☒ 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 applicant currently providing any of the above listed services?

☐ Yes, provide a list of the services the applicant is currently providing.

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

ON APPROVAL OF OUR LICENCE.

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(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.

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(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.

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