Ontario Energy Board 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 27e étage Toronto ON M4P 1E4 Téléphone: 1-888-632-6273 Télécopieur: (416) 440-7656



## Application for a Unit Sub-Metering Licence

For Office Use Only

Application Number EB - (8 - 0208)

Date Received

1. The Applicant				
Legal Name of the Ap	plicant: CARMA Billir	ng Services Inc.		
Name to Appear on L	icence:			
Indicate if same	as above			
If not the same as abo The "Name to Appear	ve, the name must include th on Licence" will appear on th	e legal name of e notice and on t	the applicant and the he licence.	legal name must appear first.
Date of formation or in	corporation: February 12, 2	2007		
As a condition of licens related to the licence.		nate a person who		contact with the OEB on matters
Mr. O Mrs. O	Williams		First Name	Initial
Miss O Ms. 💿			Shannon	P
Other (	Title/Position Vice President			
	- Limite Line	fformt from No.		
	Company Name ii di	merent from Nam	e to Appear on Licen	ce
Linenes Diversión Contra			Here to the contract of the co	
Licence Primary Conta	ct Address:			
132 Walsh Rd				
City	Province/Sta	te	Country	Postal/Zip Code
Lindsay	Ontario		Canada	K9V 4R3
Phone Number	Toll Free (if available) F	ax Number	E-mail Addres	
705-878-0711 1-888-298-3336 70		05-878-1037	info@carmain	
				440tri03.00III

3. Application Prin	nary Contact		
Indicate if same a	s above. If yes, proceed to section 4.		
The primary contact for primary contact noted a contact for the licence a	the licence application may be a person wit above. An applicant may also choose to des application. The OEB will communicate with a contact after a licence is issued.	ignate a consultant lawyor of	to he the suimes.
Mr.  Mrs.  Miss  Ms.  Other	Last Name Paul Title/Position Director Billing Systems and Regula Company Name if different from Na		Initial
Application Primary Co	ntact Address:		
132 Walsh Rd			
City	Province/State	Country	Postal/Zip Code
Lindsay	Ontario	Canada	K9V 4R3
Phone Number	Toll Free (if available) Fax Number	E-mail Address	
705-878-0711	1-888-298-3336 705-878-1037	pelliott@carmabillingse	ervices.com
Does the applicant inten	a list of trade names the applicant intends to	sub-meter provider.	
	The second secon		

## 5. Applicant's Licensing Status and History

(a)	Has the applicant or an affiliate of the Act definition for affiliate can be foun elaws statutes 90b16 e.htm)	e applicant ever been licensed ad at <u>www.e-laws.gov.on.ca/</u>	i by the <u>html/st</u>	OEB? (the Business Corporations atutes/english/
	Yes, provide details of current a	and expired licences in the tal	ole belo	w
	Licensee Name			OEB Licence Number
	t Sub-Metering Licence		ES-200	07-0965
Unit	Sub-Metering Licence		ES-201	13-0299
(b)	Has the applicant or an affiliate of the within North America?  Yes, provide details of current a  No			
	Licensee Name	Jurisdiction		Business Activity
6. Of	ficers, Directors and Key Indivi	duals		
	rovide as a separate attachment a list		ıcludina	ı name and title.
(b) P execu- matter	rovide a list of key individuals below. T	he individuals listed must be t	he indiv	iduals that are used to

Name of Key Individual	Title/Position within Applicant's Business (or identify company if not the Applicant's Business)  President		
Rick Williams			
Shannon Williams	Vice President		
Ross Pilkey	Vice President		

7. Intended Services  Please describe the applicant's intended services with respect to unit sub-metering:
The revenue billing, collection and call centre activities of unit sub-meters for residential, commercial and industrial multi-tenanted buildings.
Is the applicant currently providing these services?
No, indicate when the applicant intends to provide these services

If the applicant objects to public disclosure of any of the information in the preceding sections, the applicant must notify the OEB and follow the OEB's Practice Direction on Confidential Filings.

The following sections of information (8 to 12) will be maintained in confidence.
8. Corporate Organization
Please describe the applicant's corporate organization and the applicant's relationship with its energy sector affiliates. Provide a corporate organization chart if possible.
Please indicate if corporate organization chart is attached.
9. Finance Note - it is preferable to receive financial information for the applicant and not an affiliate of the applicant.
Please provide audited financial statements for the last two years.
If audited financial statements are not available, identify which of the following has been attached in support of this application for a unit sub-metering licence. Please identify a minimum of one item:
Most recent prospectus and quarterly report
Unaudited financial statements for the last two years. Documents must be signed by one key individual
Pro forma statements if applicant is anew company. Documents must be signed by one key individual
Parental guarantee and the financial statements of the parent company
Letter of reference from the applicant's bank
Other, please specify
Will the applicant manage all financial aspects of its business with its own staff?
Yes
No, identify contractors who will provide this service
I0. Technical Resources
Does the applicant employ technical resource staff or contractors with appropriate qualifications and experience in unit sub-metering?
Yes, describe the technical qualifications of at least one person employed by the applicant
CBSI has 5 full time CSR's, 1 part-time Administrations Clerk, 2 Billing Clerks, 1 Billing Supervisor, 1 Director of Billing Syst-
ems with 30 years utility experience, 1 VP with 15 years of Contract Negotiation and Sub-metering experience.
No, identify plans to acquire the necessary technical resources for technical matters related to unit sub-metering