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September 28, 2018

VIA COURIER

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



EB-2018-0282

## Renewal of Gas Marketer Licence GM-2013-0261

In compliance with the renewal process, please find enclosed the following documentation for your review and approval:

- 1) Two original signed copies of the application form
- 2) A \$200 cheque for the renewal fee
- 3) Corporate organization chart
- 4) 2017 Financial statements
- 5) Two documents to support identity of key individuals

If you require any further information, please do not hesitate to contact me.

Sincerely

Anne Mason

Vice President | amason@goenergy.ca

Tel (519) 888-0335 Fax (519) 888-0644 Cell (519) 501-2262



## 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 list of all officers and directors, including name and title has been attached to the application form. A corporate organization chart has been attached to the application form. Section 12 has been completed and all relevant financial information has been included. Section 15 has been completed for all key individuals. Each key individual has provided copies of two documents to support their identity. One of the documents includes a photo.

**Ontario Energy**  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 Gas Marketer Licence** 





For Office Use Only				
Application Number EB - 2 0,18 - 0287				
Date Received	Oct. 1/18			

1. The Applica	ant	
Legal Name of the Applicant:		GAS ONTARIO INC
Name to Appear	on Licence:	GO ENERGY
Indicate if t	he name to appear	r on the licence is the same as the legal name.
include the legal	name of the applic	ear on the licence is not the same as the legal name, the name on the licence mustant and the legal name must appear first. The "Name to Appear on Licence" will and on the licence.
Business Classifi	ication:	
C Sole Proprieto	or	
C Partnership		
Corporation		
C Other (describ	oe)	
Date of formation	or incorporation:	DECEMBER 20, 2002
Place of formation	n or incorporation:	WATERLOO
Province/state	ONTARIO	
Country	CANADA	
		applicant must be at least 18 years old. e or she at least 18 years old?
Yes		
C No		
Not applicable	e - not an individua	al

### 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.

	Last Name	First Name	Initial
Mr. C Mrs. 💽	MASON	ANNE	M
Miss C Ms. C	Title/Position		
Other C	VICE PRESIDENT		
	Company Name if different from	Name to Appear on Licence	
Licence Primary Contact Ad	dress:		
299 NORTHFIELD DRIVE S	UITE 2		
City	Province/State	Country	Postal/Zip Code
WATERLOO	ONTARIO	CANADA	N2K 4H2
Phone Number To	I Free (if available) Fax Number	E-mail Address	
519-888-0335	519-888-064	4 AMASON@GOENER	GY.CA

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. O	Mrs. C	Last Name Title/Position	(#)	First Name	Initial
Other 🔿		Title/T OSITION			
	/	Company Name if	different from Name	to Appear on Licence	,
Address for	Service in O	ntario (if different than th	e Licence Primary C	ontact Address above)	
City			Province	Postal Code	
			ONTARIO		
Phone Num	ber	Toll Free (if available)	Fax Number	E-mail Address	

3. Ap	plication	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. 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 but with the licence primary contact after a licence is issued.

Mr. O	Mrs. C	Last Name	First Name	Initial
Miss C Other C	Ms. C	Title/Position		
		Company Name if different fro	om Name to Appear on Licence	= = = = = = = = = = = = = = = = = = =
Application I	Primary Contac	ct Address:		
City		Province/State	Country	Postal/Zip Code
Phone Num	ber T	oll Free (if available) Fax Numb	er E-mail Address	

### 4. Customer Complaint or Inquiries Primary Contact

Provide contact information of the person to whom correspondence or communication regarding customer complaints or inquiries should be addressed. The mailing address should be in Ontario and the telephone number should be listed in Ontario which may be reached by the general public without a charge.

Mr. C Miss C Other C	Mrs. © Ms. C	Last Name PURVIS Title/Position SENIOR OPERAT Company Name if	J	First Name ULIE Appear on Licence	Initial
Customer Co	mplaint or	Inquiries Primary Contact	t Address:		
299 NORTH	FIELD DRIN	/E SUITE 2			
City			Province	Postal Code	
WATERLOO			ONTARIO	N2K 4H2	
Phone Numb	er	Toll Free	Fax Number	E-mail Address	
519-888-033	5 X 233	1-844-999-0335	519-888-0644	JPURVIS@GOENERGY.CA	

5. Type of Application				
C New licence				
€ Renewal, please provide the licence nu	mber and expiry date of the existing licence			
Licence Number: GM- 2013-0261	Expiry Date: JANUARY 29, 2019			
6. Trade Names				
The gas marketer licence authorizes the licence authorizes authorizes the licence authorizes the licence authorizes authorizes the licence authorizes authorized the licence authorizes authorized the licence	censee to conduct business using the name un by the licensed gas marketer.	der which the licence is held.		
Does the applicant intend to use trade nan	nes?			
Yes, provide a list of trade name	s the applicant intends to use in the space pro	vided below.		
No, proceed to 7.				
GO ENERGY				
7. Applicant's Licensing Status a	nd 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 <i>Business Corporations Act</i> definition for affiliate can be found at <a href="https://www.e-laws.gov.on.ca">www.e-laws.gov.on.ca</a> ).				
Yes, provide details of current a	nd expired licences in the table below.			
No, proceed to 7(b).				
Licensee Name	Relation to the applicant (e.g., applicant itself, affiliate, partneretc.)	Licence Number		
GAS ONTARIO INC	APPLICANT ITSELF	GM-2013-0261		

Licensee Name	Relation to the applicant (e.g., applicant itself, affiliate, partneretc.)	Licence Number
GAS ONTARIO INC	APPLICANT ITSELF	GM-2013-0261
GAS ONTARIO INC	APPLICANT ITSELF	GM-2008-0279
GAS ONTARIO INC	APPLICANT ITSELF	GM-2003-0045
GAS ONTARIO INC	APPLICANT ITSELF	ER-2017-0093
GAS ONTARIO INC	APPLICANT ITSELF	ER-2012-0197
GAS ONTARIO INC	APPLICANT ITSELF	ER-2007-0085

(b)	have any other app	, an affiliate of the app plication(s) before the e details in the table b	OEB?	ated entity (e.g.,	a partnership or	· limited partnership)
	Applicant Na		Type of Ap	olication	OEB File N	lumber (if applicable)
	- принами на		77.		0.25 / 110 /	terribor (ii apprioable)
(c)	ever undertaken lic	an affiliate of the appli ensed energy sector a details of current and	activity in any other	jurisdiction with		
	Company Name	Jurisdiction	Business Ac	tivity Name o	f Licensing Body	Licence/Registration No.
8.	Officers, Directo	ors and Key Indivi	duals	•		
(a)	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. If unable to provide a minimum of three, please explain. THESE ARE THE ONLY OFFICERS / DIRECTORS OF THE CORPORATION					of three, please ON
	Name o	f Key Individual				t's business (or identify licant's business)
ST	EPHEN SABEAN			PRESIDENT		
AN	NE MASON			VICE PRESIDE	NT	

# 9. Intended Services: Intended Services: please identify which of the following services the applicant intends to offer. to sell or offer to sell gas to low-volume consumers (consuming 50,000m³ or less of natural gas per year) in Ontario. to act as an agent or broker for a gas marketer with respect to the sale or offering for sale of natural gas to low-volume consumers, or as an agent or broker for low-volume consumers with respect to the sale or offering for sale of natural gas 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. GAS ONTARIO PURCHASES AND SELLS NATURAL GAS DIRECTLY TO CLIENTS. IN SOME CASES FOR LARGE VOLUME CLIENTS WE MAY ACT AS A PRIMARY AGENT FOR THE CLIENT. No, indicate when the applicant intends to provide these services. SEE ABOVE