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'énergle 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 an Electricity Wholesaler Licence

For Office Use Only		
Application Number	EB-	
Date Received		

# 1. The Applicant

Legal Name of th	e Applicant :	APHRIA INC.		
Business Classific	cation:			
Sole Proprietor				
Partnership				
Corporation				
Other (describe	;)			
Date of formation	or incorporation	: <u>June 2</u> 014		
Place of formation	or incorporation	N.	•	· .
Province/State	ONTARIO			
Country	CANADA			
If the applicant is she at least 18 ye		e applicant must be at least 18 y	rears old. If the applicant is a	an individual, is he or
🗌 Yes				
🔲 No				
Not Applicable	e - not an individ	ual		
Head Office or Bu	usiness Address	of Applicant		
245 TALBOT ST	W			
City		Province/State	Country	Postal/Zip Code
LEAMINGTON	· ·	ONTARIO	CANADA	N8H3C4
Phone Number		Toll Free (if available)	E-mail Address	

Website Address

https://aphria.ca/

1-844-427-4742

## 2. Application Type

🔽 New

Renewal, provide the licence number and expiry date of the current licence.

Licence Number	•	Expiry Date	
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#### 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.

	Last Name	First Name	Initial
Mr. 💿 Mrs. 🔿	Cervini	John	
Miss C Ms. C	Title/Position		
Other C	SVP of Infrastructure & Technolog	у	
	Company Name		
	Aphria Inc.		
Licence Primary Contact A 245 Talbot St W	ddress:	·····	
City	Province/State	Country	Postal/Zip Code
Leamington	ON	Canada	N8H 3C4
Phone Number	Toll Free (if available)	E-mail Address	
	1-844-427-4742	johnc@aphria.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.

	Last Name	FirstName	Initial
Mr. 💿 Mrs. 🔿	Tracey	Sheldon	
Miss C Ms. C	Title/Position		
Other C	Project Manager, P. Eng		
	Company Name	· · · · · · · · · · · · · · · · · · ·	
	Essex Energy Corporation		

Application Primary Contac	t Address:		
2199 Blackacre Drive			
City	Province/State	Country	Postal/Zip Code
Oldcastle	ON	Canada	NOR 1L0
Phone Number	Toll Free (if available)	E-mail Address	
519-946-2000		stracey@essexene	rgy.ca

#### 5. Trade Names

The electricity wholesaler 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.
- $\checkmark$  No, proceed to section 6.

#### 6. 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), ever been licensed by the OEB? (The Business Corporations Act definition for affiliate can be found at <u>www.e-laws.gov.on.ca</u>)

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

 $\boxed{\checkmark}$  No, proceed to 6(b).

Licensee Name	Relation to the Applicant (e.g., applicant itself, affiliate, partneretc.)	Licence Number
		·····-

(b) Does the applicant, an affiliate of the applicant, or an associated entity have any other application(s) before the OEB?

Yes, provide details in the table below.

✓ No, proceed to 6(c).

Applicant Name	Relationship to this Applicant	Type of Application	OEB File Number

(c) Has the applicant, an affiliate of the applicant, or an associated entity ever undertaken energy sector activity in any other jurisdiction within North America?

Yes, provide details in the table below.

🖌 No

Company Name	Relation to the Applicant	Jurisdiction	Business Activity	Name of Licensing Body and Licence/Registration No. (if applicable)

### 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)	
Carl Merton	CFO	
John Cervini	SVP of Infrastructure & Technology	
Cole Ciacciavillani	Co-Founder	

#### 8. Intended Markets and Services

Identify the applicant's intended markets and services. Select any that apply.

- To purchase electricity or ancillary services in the IESO-administered markets.
  - To purchase electricity or ancillary services directly from a generator.
- To sell electricity or ancillary services in the IESO-administered markets.
  - To sell electricity or ancillary services to wholesalers.
  - To sell electricity or ancillary services to distributors (i.e., standard supply services).
    - To sell electricity or ancillary services to electricity retailers.
    - To sell electricity or ancillary services to persons outside of the Ontario market.

To sell electricity to consumers, defined as a person who uses for the person's own consumption, electricity that the person did not generate. If the applicant selects this item, the applicant may require a retailer licence. The application form can be found at <u>www.oeb.ca</u>.