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'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 an Electricity Retailer Licence

Application Number EB - 2019 - 0153

Date Received May 14/19

1. The Applicar	nt		()
Legal Name of the		Link Energy Supply Inc.	
Name to Appear o	n Licence:	Link Energy Supply Inc.	
Indicate if the	e name to appear	on the licence is the same as the legal name.	
Please note that if	the name to appe ame of the applica	ear on the licence is not the same as the legal name, the name of ant and the legal name must appear first. The "Name to Appear	n the licence must on Licence" will
Business Classific	ation:		
○ Sole Proprietor			
○ Partnership			
Corporation			
C Other (describe)		
Date of formation of	or incorporation:	September 19, 2012	
Place of formation	or incorporation:	Montreal	
Province/state (Quebec		
Country (Canada		
		applicant must be at least 18 years old. or she at least 18 years old?	
⊂ 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. • Mrs. C	l alelit	First Name Darryl	Initial				
Miss C Ms. C	Title/Position	Title/Position					
Other C	EVP, Operations						
	Company Name if different from N	Name to Appear on Licence					
Licence Primary Cont	act Address:						
275, chemin Bord-du-	Lac Lakeshore						
City	Province/State	Country	Postal/Zip Code				
Pointe-Claire	Quebec	Canada	H9S4L1				
Phone Number	Toll Free (if available) Fax Number	E-mail Address	**				
905-339-8066	1-855-444-5465 darryl.parent@linkenergy.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.

		Last Name		First Name	Initial		
Mr. 📵	Mrs. ←	Eisenberg		Robert			
Miss C	Ms. ←	Title/Position	Title/Position				
Other C		Associate	Associate				
		Company Name if	different from Name t	o Appear on Licence			
	WeirFoulds LLP						
Address for S	Service in On	tario (if different than th	e Licence Primary Co	ntact Address above)			
		., PO Box 35, TD Bank					
City			Province	Postal Code			
Toronto ONTARIO M5K 1B7							
Phone Numb	er	Toll Free (if available)	Fax Number	E-mail Address			
416-365-111	0		416-365-1876 reisenberg@weirfoulds.com				

3. Applicat	ion Primary	Contact				
Indicate	if same as abo	ve. If yes, proceed to	section 4.			
The primary or primary contact for the	contact for the li ct noted above e licence applic	cence application ma	ay be a person within Ilso choose to design communicate with thi	ate a consultant lawve	ation other than the licence r, etc. to be the primary rrse of the application but	
		Last Name		First Name	 Initial	
Mr. C Mrs. (• Roy-Hébert Tessa						
Miss C	Ms. ←	Title/Position				
Other (Legal and Regulat	ory Manager			
		Company Name if	different from Name	to Appear on Licence		
Application P	rimary Contact	Address:				
275 chemin E	Bord-du-Lac Lal	keshore				
City		Province/S	state	Country	Postal/Zip Code	
Pointe-Claire		Quebec		Canada	H9S4L1	
Phone Number Toll Free (if available) Fax Number E-mail Address						
18886317977, ext314 18889581475			18889581475	tessa.roy@dneresources.com		
Provide contactinquiries shoul Ontario. If the	ct information o d be addressed applicant inten of electricity), th	 I he mailing address ds to retail electricity 	correspondence or c ss should be in Ontar to low-volume consu	io and the telephone no mers (annually consum	ng customer complaints or umber should be listed in ning less than 150,000 be reached by the general	
		Last Name		First Name	Initial	
Mr. • Mrs. C Burns				James		
Miss C	Ms. ←	Title/Position				
Other (Other CCustomer Service Manager					
		Company Name if	different from Name t	o Appear on Licence		
Customer Con	nplaint or Inquir	ies Primary Contact	Address:			
7-841 Sydney						

Province

ONTARIO

Fax Number

1-855-440-5465

Postal Code

E-mail Address

customerservice@linkenergy.com

K6H 7L2

City

Cornwall

Phone Number

647-361-8114

Toll Free

1-855-444-5465

5. Type of Application		
○ New licence		
Renewal, please provide the licence no	umber and expiry date of the existing licence	
Licence Number: ER- 2014-0136	Expiry Date: September 3, 2019	_
6. Trade Names		
The electricity retailer licence authorizes the held. It also provides for the use of trade n	he licensee to conduct business using the nan names by the licensed electricity retailer.	ne under which the licence is
Does the applicant intend to use trade nar	mes?	
Yes, provide a list of trade name	es the applicant intends to use in the space pro	ovided below.
No, proceed to 7.		
7. Applicant's Licensing Status ar	nd History	
(a) Has the applicant, an affiliate of the applicant	pplicant, or an associated entity (e.g., a partne Business Corporations Act definition for affilia	ership or limited partnership) te can be found at <u>www.e-laws.</u>
Yes, provide details of current ar No, proceed to 7(b).	nd expired licences in the table below.	
Licensee Name	Relation to the applicant (e.g., applicant itself, affiliate, partneretc.)	Licence Number
Link Energy Supply Inc.	Applicant itself	GM-2014-0151
Link Energy Supply Inc.	Applicant itself	ER-2014-0136
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(b) Does the applicant	t, an affiliate of the application(s) before the O	cant, or an asso	ociated en	tity (e.g.,	a partnership o	r limited partnership)
	le details in the table bel					
No, proceed						
Applicant Na	ame	Type of Application			Ontario Energy Board File Number (if applicable)	
Link Energy Supply Inc.	Ga	as Marketer Lice	nse		GM-2014-0151	
				+:		
(c) Has the applicant, ever undertaken lic	an affiliate of the applica	ant, or an assoc tivity in any othe	iated entit er jurisdict	y (e.g., a tion within	partnership or n North America	limited partnership) a?
Yes, provide	details of current and ex	pired licences i	n the table	e below		
Company Name	Jurisdiction	Business A	ctivity	Name of	Licensing Body	Licence/Registration No.
Link Energy Supply Inc.	Alberta	Electricity Retai	ailer Services A		Alberta	337994
Link Energy Supply Inc.	Alberta	Natural Gas Re	etailer Services Alberta		Alberta	344323
8. Officers, Directo	rs and Key Individu	ıals				
	corporation, provide as		chment a	list of all	officers and dire	ectors, including name
(b) Provide a list of key following functions f These key individua proprietors.	or the applicant: regulate	ory requiremen	ts and cor	iduct, fin:	ancial matters a	responsible for the and technical matters. her officers, directors and
Note: Please list a explain.	minimum of three key		f unable t	o provid	e a minimum c	of three, please
			T:41 - /		*(I.* P. 0	
Name of Key Individual			Title/position within applicant's business (or identify company if not the applicant's business)			
Wayne Burke				President		
Richard Fortin		Chief Financial Officer				
Darryl Parent				EVP, Operations		

9.	Intended Services and Markets
(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	e applicant currently providing any of the above listed services?
	Yes, provide a list of the services the applicant is currently providing.
	No. indicate when the applicant integrals to
	No, indicate when the applicant intends to provide these services.
	2020 or as soon as market conditions become more favorable
(b)	Wholesale Market Participation: does the applicant intend to operate in the IESO-administered markets and settle bilateral contracts through the IESO?
	Yes
\sum	No, please explain how the applicant intends to participate.
	The Applicant hedges using financially based products and settles with the utilities through the retail settlement
	mechanism.
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?
\overline{X}	Yes
	No, please explain how the applicant intends to participate.