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 a Gas Marketer Licence





CINIAMO ENERGY BOARD

For	Office Use Only
Application Number	EB-2020-0084
Date Received	Feb. 19/20

1. The Applicant **ONIT ENERGY LTD** Legal Name of the Applicant: **ONIT ENERGY LTD** Name to Appear on Licence: 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: January 11, 2008 **TORONTO** Place of formation or incorporation: 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 O No Not applicable - not an individual

2. Licence Primary Contact

City

Phone Number

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. 🌘 Mrs. 🔿	BALABAN	DAVID	<u>E</u>				
Miss O Ms. O	Title/Position	Title/Position					
Other O	PRESIDENT & COO						
	Company Name if different from N	Name to Appear on Licence					
	ONIT ENERGY LTD						
Licence Primary Contact Ad	dress:						
2 BLOOR STREET W, SUIT	ΓΕ 2700						
City	Province/State	Country	Postal/Zip Code				
TORONTO	ONTARIO	CANADA	M4W3E2				
Phone Number To	ll Free (if available) Fax Number	E-mail Address					
416.307.2462	344.604.7283 1.855.344.172	22 DAVID.BALABAN@C	WENERGY.COM				
province of Ontario. Applicar	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. O Mrs. O							
Miss O Ms. O	Miss C Ms. C Title/Position						
Other C							
	Company Name if different from I	Name to Appear on Licence					
Address for Service in Onta	ario (if different than the Licence Prim	ary Contact Address above)					

Province ONTARIO

Fax Number

Toll Free (if available)

Postal Code

E-mail Address

ა.	Aþ	pii	catic)N F	rımar	y Conta	CL	

∇	Indicate if san	avode se ar	If you	proceed to	n section A
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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.

	Mrs. () Ms. ()	Last Name Title/Position Company Name if different	First Name from Name to Appear on Licence	Initial
Application Prin	mary Contac	t Address:		
City		Province/State	Country	Postal/Zip Code
Phone Number	r T	oll Free (if available) Fax Nu	mber 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. 💿	Mrs. 🔿	Last Name SHULMAN		First Name MORLEY	Initial			
Miss 🔿	Ms. O	Title/Position	Title/Position					
Other 🔿		DIRECTOR, CO	OMPLIANCE & CUSTO	MER EXPERIENCE				
		Company Nam	e if different from Name	to Appear on Licence				
	ONTARIO WHOLESALE ENERGY GAS & ELECTRIC							
Customer Co	mplaint or I	nquiries Primary Conf	act Address:					
2 BLOOR ST	REET W, S	SUITE 2700						
City		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Province	Postal Code				
TORONTO ONTARIO M4W3E2								
Phone Numb	er	Toll Free	Fax Number	E-mail Address				
416.307.247	4	1.844.604.7283	1.855.344.1722	MORLEY.SHULMAN@OWENERGY.COM				

5. Type of Application		
O New licence		
• Renewal, please provide the licence nu	mber and expiry date of the existing licence	
Licence Number: GM- 2015-0158	Expiry Date: July 29, 2020	
6. Trade Names		
The gas marketer licence authorizes the licence authorizes are also also also also also also also also	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 name	nes?	
Yes, provide a list of trade name	s the applicant intends to use in the space pro	vided below.
No, proceed to 7.		
ONTARIO WHOLESALE ENERGY GAS	& ELECTRIC	
7. Applicant's Licensing Status a	nd History	
ever been licensed by the OEB? (the gov.on.ca).	pplicant, or an associated entity (e.g., a partne Business Corporations Act definition for affiliat	
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
ONIT ENERGY LTD	LICENSE HOLDER	GM-2015-0158
ONIT ENERGY LTD	LICENSE HOLDER	GM-2013-0077
ONIT ENERGY LTD	LICENSE HOLDER	ER-2013-0157
ONIT ENERGY LTD	LICENSE HOLDER	ER-2015-0076

(b) Does the applicant, an affiliate of the applicant, or an associated entity (e.g., a particular have any other application(s) before the OEB?						a partnership or	limited partnership)		
	Yes, provide details in the table below.								
	No, proceed	d to 7(c).							
	Applicant Na	Applicant Name		Type of Application		Ontario Energy Board File Number (if applicable)			
(c)	ever undertaken lic	an affiliate of the applicensed energy sector a	activity in any other	r jurisdicti	on withi	•			
	Yes, provide✓ No	details of current and e	expired licences in	the table	below				
	Company Name	Jurisdiction	Business Activity N		Name o	f Licensing Body	Licence/Registration No.		
R.	Officers Directo	ors and Key Indivi							
	,	•		chment a	list of al	l officers and dir	ectors, including name		
(b)	following functions	y individuals below. Th for the applicant: regu als may include the Cl	latory requirement	ts and co	nduct, fi	nancial matters			
	Note: Please list a explain.	a minimum of three k	ey individuals. If		to provi	de a minimum	of three, please		
	Name o	of Key Individual		Title			t's business (or identify licant's business)		
TIN	/ MULCAHY			CEO		,	1		
DA	VID BALABAN			PRESIDENT & COO					
GE	REG CAREY			DIRECTOR FINANCE					

MORLEY SHULMAN

DIR., COMPLIANCE & CUSTOMER EXPERIENCE

9. Intended Services: please identify which of the following services the applicant intends to offer. ito sell or offer to sell gas to low-volume consumers (consuming 50,000m³ or less of natural gas per year) in Ontario. ito 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. THE ORGANIZATION CURRENTLY MARKETS TO BOTH SMALL AND LARGE COMMERCIAL BUSINESSES THROUGHOUT ONTARIO. WE DO NOT MARKET TO RESIDENTIAL CUSTOMERS

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