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Lawyer

June 11, 2020

Christine E. Long  
Registrar and Board Secretary  
Ontario Energy Board  
PO Box 2319  
2300 Yonge Street, 27th Floor  
Toronto ON  
M4P 1E4

Dear Ms. Long

**RE: EB-2019-0255 Potential Projects to Expand Access to Natural Gas Distribution  
Energy Probe Cost Claim**

Attached is the cost claim of Energy Probe Research Foundation for the EB-2019-0255 Potential Projects to Expand Access to Natural Gas Distribution consultation. If you require any additional information regarding this claim, do not hesitate to contact me.

Respectfully submitted on behalf of Energy Probe.

Tom Ladanyi  
Consultant Representing Energy Probe

416 423-3685  
[tom.ladanyi@rogers.com](mailto:tom.ladanyi@rogers.com)

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Energy Probe Research Foundation 225 BRUNSWICK AVE., TORONTO, ONTARIO M5S 2M6

Phone: (416) 964-9223 Fax: (416) 964-8239 E-mail: [EnergyProbe@nextcity.com](mailto:EnergyProbe@nextcity.com) Internet: [www.EnergyProbe.org](http://www.EnergyProbe.org)

# Ontario Energy Board



## COST CLAIM FOR CONSULTATIONS

This form should be used by a party (defined in the Practice Direction on Cost Awards as including a participant in a consultation process) in a consultation before the Board to identify the fees and disbursements that form the party's cost claim. Paper and electronic copies of this form and itemized receipts must be filed with the Board and served on one or more other parties as directed by the Board in the applicable Board Notice of Hearing for Cost Awards. Please ensure all required fields are filled in and the Affidavit portion is signed and sworn or affirmed.

### Instructions

- Required data input is indicated by yellow-shaded fields. Formulas are present in the document to assist with the calculation of the cost claim.
- All claims must be in Canadian dollars. If applicable, state exchange rate and country of initial currency.  
Rate: \_\_\_\_\_ Country: \_\_\_\_\_
- A separate "Statement of Disbursements Being Claimed" is required for each consultant or lawyer/articling student/paralegal. However only one "Statement of Fees Being Claimed" and one "Summary of Fees and Disbursements Being Claimed" covering the whole of the party's cost claim should be provided.
- The cost claim must be supported by a completed Affidavit signed by a representative of the party.
- A CV for each consultant must be attached unless, for a given consultant, a CV has been provided to the Board in another process within the last 24 months.
- Except as provided in section 7.03 of the Practice Direction on Cost Awards, itemized receipts must be provided.

File # EB- <u>2019-0255</u>	Process: <u>Natural Gas Expansion Consultation</u>
Party: <u>Energy Probe Research Foundation</u>	Affiant's Name: <u>Thomas J. Ladanyi</u>
HST Number: <u>10730 5146 RT0001</u>	HST Rate Ontario: <u>6.5%</u>
Full Registrant <input type="checkbox"/> Unregistered <input type="checkbox"/> Other <input type="checkbox"/>	Qualifying Non-Profit <input checked="" type="checkbox"/> Tax Exempt <input type="checkbox"/>

### Affidavit

I, Thomas J. Ladanyi, of the City/Town of Toronto  
in the Province/State of Ontario, swear or affirm that:

1. I am a representative of the above-noted party (the "Party") and as such have knowledge of the matters attested to herein.
2. I have examined all of the documentation in support of this cost claim, including the attached "Summary of Fees and Disbursements Being Claimed", "Statement of Fees Being Claimed" and "Statement(s) of Disbursements Being Claimed".
3. The attached "Summary of Fees and Disbursements Being Claimed", "Statement of Fees Being Claimed" and "Statement(s) of Disbursements Being Claimed" include only costs incurred and time spent directly for the purposes of the Party's participation in the Ontario Energy Board process referred to above.
4. This cost claim does not include any costs for work done, or time spent, by a person that is an employee or officer of the Party as described in sections 6.05 and 6.09 of the Board's Practice Direction on Cost Awards.

Thomas J. Ladanyi  
Signature of Affiant

Sworn or affirmed before me at the City/Town of Toronto,  
in the Province/State of Ontario, on June 10, 2020  
(date)

Erin M. Kelly  
Commissioner for taking Affidavits

# Ontario Energy Board



## COST CLAIM FOR CONSULTATIONS

File # EB- 2019-0255

Process: Natural Gas Expansion Consultation

### Affidavit and Summary of Fees and Disbursements

Party: Energy Probe Research Foundation

#### Summary of Fees and Disbursements Being Claimed

Legal/consultant fees	\$1,650.00
Disbursements	\$0.00
HST	\$107.25
<b>Total Cost Claim</b>	<b>\$1,757.25</b>

#### Payment Information

Make cheque payable to: Energy Probe Research Foundation

Send payment to this address: 225 Brunswick Avenue

Toronto, Ontario

M5S 2M6

Attention: Frank Cianflone

#### Detail of Fees and Disbursements Being Claimed

#### Statement of Fees Being Claimed

Statement of Fees being claimed for Eligible Activity is found on the third tab of this workbook.

#### Statement(s) of Disbursements Being Claimed

Statement of Disbursements being claimed is found on the fourth tab of this workbook.



# Ontario Energy Board

## COST CLAIM FOR CONSULTATIONS

### Affidavit and Summary of Fees and Disbursements



#### Individual Whose Costs are Being Claimed

Name: Tom Ladanyi

Counsel/Articling Student/Paralegal: ☐

Analyst/Consultant: ☒

CV attached: ☐

Year Called  
to Bar

CV not required: ☒

Completed Years  
Practicing/Years of Relevant  
Experience

46

CV on file with OEB

Name: Roger Higgin

Counsel/Articling Student/Paralegal: ☐

Analyst/Consultant: ☒

CV attached: ☐

Year Called  
to Bar

CV not required: ☒

Completed Years  
Practicing/Years of relevant  
experience

31

CV on file with OEB

Name: \_\_\_\_\_

Counsel/Articling Student/Paralegal: ☐

Analyst/Consultant: ☐

CV attached: ☐

Year Called  
to Bar

CV not required: ☐

Completed Years  
Practicing/Years of relevant  
experience

Name: \_\_\_\_\_

Counsel/Articling Student/Paralegal: ☐

Analyst/Consultant: ☐

CV attached: ☐

Year Called  
to Bar

CV not required: ☐

Completed Years  
Practicing/Years of relevant  
experience

Name: \_\_\_\_\_

Counsel/Articling Student/Paralegal: ☐

Analyst/Consultant: ☐

CV attached: ☐

Year Called  
to Bar

CV not required: ☐

Completed Years  
Practicing/Years of relevant  
experience



## Process

Party Energy Probe Research Foundation

HST Rate: 6.5%

Individual Whose Fees are Being Claimed	Activity		Written comments on Draft Guidelines		Subtotal	HST	Total
	Hours	Up to 5 hours					
	Hourly rate						
Tom Ladanyi	\$330.00		1.00		\$330.00	\$21.45	\$351.45
Roger Higgins	\$330.00		4.00		\$1,320.00	\$85.80	\$1,405.80
					\$0.00	\$0.00	\$0.00
					\$0.00	\$0.00	\$0.00
					\$0.00	\$0.00	\$0.00
<b>Total:</b>			<b>5.00</b>		<b>\$1,650.00</b>	<b>\$107.25</b>	
<b>Total legal/consultant fees:</b>							<b>\$1,757.25</b>

Total legal/consultant fees:

**\$1,757.25**

## TL Energy Regulatory Consultants Inc.

Date: 10 June 2020

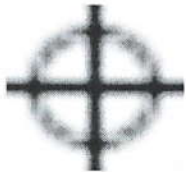
Invoice No: EPRF 2020-14

To:  
Frank Cianflone  
Energy Probe Research Foundation  
225 Brunswick Ave.  
Toronto, ON  
M5S 2M6

From:  
Tom Ladanyi  
TL Energy Regulatory Consultants Inc.  
41 Divadale Drive  
Toronto, ON  
M4G 2N7  
Phone: 416-423-3685  
E-Mail: tom.ladanyi@rogers.com

OEB Docket: EB-2019-0255 Natural Gas Expansion

Date	Description of Work	Hours	Rate	Amount
13-Jan	Comments	0.5	\$ 330.00	\$ 165.00
14-Jan	Comments	0.5	\$ 330.00	\$ 165.00
			Subtotal:	\$ 330.00
			HST 13%:	\$ 42.90
			Total	\$ 372.90

**SPA**

15 Malabar Place  
Don Mills, Toronto, Ontario M3B 1A4  
(416) 391-0738 fax (416) 391-0738

Invoice No. 2020-EP-07

**INVOICE :****Customer**

Name Energy Probe Research Foundation  
Address 225 Brunswick Avenue  
City Toronto Province Ont P.C. M5S 2M6  
Attn Frank Cianflone

Date **2020-06-10**  
Project No **EGI Natural Gas**  
Title **Expansion**  
**EB-2019-0255**

Hours	Description Of Services	Unit Price	TOTAL
4.00	2020-01-11 Review OEB Letter provide comments to client	\$330.00	\$1,320.00
			\$1,320.00
SubTotal			\$1,320.00
			\$0.00
Taxes HST			\$171.60
PST			
TOTAL			\$1,491.60

4.0 Total

**Payment Details**

- ☐ Cash  
☒ Cheque  
☐ Other

Name **CHEQUES PAYABLE TO SPA**

Date \_\_\_\_\_

HST NUMBER 88413 6714 RT0001

Thank you for your Business