



Ontario Energy Board
Commission de l'Énergie de l'Ontario
**Application for Electricity Retailer
Licence**

Ontario Energy Board
2300 Yonge Street
P.O. Box 2319
Toronto, ON M4P 1E4
Telephone: 1-888-632-6273
Facsimile: (416) 440-7656

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C.P. 2319
Toronto, ON M4P 1E4
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EW
Oct. 16/07

Original

For Office Use Only	
Application Number	EB- 2007-0811
Date Received	Oct. 16/07

A. General information

1. Licence Name

Name of Applicant: **ENERGY ADVANTAGE INC.**

2. Primary Contact for this Application

Mr. <input checked="" type="checkbox"/> Mrs. <input type="checkbox"/>	Last Name: Gazzola	Full First Name: Frank	Initial: J.
Miss <input type="checkbox"/> Ms. <input type="checkbox"/>	Position Held: Director Electricity		
Other: _____			
Contact Address (if R.R., give Lot, Concession No. and Township) 5420 North Service Road, Suite 501			
City Burlington	Province/State Ontario	Country Canada	Postal/Zip Code L7L 6C7
Phone Number 905-319-1717	FAX Number 905-319-7980	E-mail Address frank.gazzola@energyadvantage.com	

3. Type of Application

New licence	<input type="checkbox"/>
Renewal	<input checked="" type="checkbox"/>

4. Business Classification

Sole Proprietor	<input type="checkbox"/>
Partnership	<input type="checkbox"/>
Corporation	<input checked="" type="checkbox"/>
Other (describe):	

5. Trade Names

The standard electricity retailer licence authorizes the licensee to conduct business using the company name under which the licence is held. It also provides for the use of trade names by a licensed retailer.

Does your company intend to use trade names?

Yes

No

☐☒

If yes, please provide a list of all trade names your company intends to use in its retailing of electricity.

6. Type of Licence

a) Do you intend to retail electricity to small-volume consumers (consuming less than 150,000 kWh/year) in Ontario?

Yes

No

☐☒

b) Do you currently have contracts with small-volume consumers?

Yes

No

☐☒

c) Do you intend to retail electricity to large-volume consumers (consuming more than 150,000 kWh/year) in Ontario?

Yes

No

☒☐

d) Do you currently have contracts with large-volume consumers?

Yes

No

☒☐

Note: if no market is indicated, the Applicant will be assumed to be intending to serve both large volume and small volume consumers. If the Applicant indicates an intention to serve large-volume consumers only, a restricted licence may be issued.

e) Do you intend to act as an Agent?

Yes

No

☒☐

f) Do you currently offer contracts to act as an agent?

Yes

No

☒☐

g) Does your company intend to market green or alternative power?

Yes

No

☒☐

B. Information about the Applicant**7. Applicant**

a) Application on behalf of:			
Full Legal Name of Applicant ENERGY ADVANTAGE INC.		Ontario/Other Jurisdiction Corporation Number or Business Registration Number 001146795	Date of Formation or Incorporation 6 Nov. 1995
b) Business Address (if different from Contact Address in Question 2 above). If R.R., give Lot, Concession No. and Township. N/A			
City	Province/State	Country	Postal/Zip Code
Phone Number	FAX Number	E-Mail Address (if applicable)	
c) Address for service in Ontario (if different from Business Address in 7b above). If R.R., give Lot, Concession No. and Township. N/A			
City	Province	County	Postal Code
Phone Number	FAX Number	E-Mail Address (if applicable)	
d) Please provide contact information of the person to whom correspondence or communication regarding customer complaints or inquiries should be addressed			
Mr. <input checked="" type="checkbox"/> Mrs. <input type="checkbox"/>	Last Name: Masse	Full First Name: Yuan	Initial:
Miss <input type="checkbox"/> Ms. <input type="checkbox"/>	Position Held: Vice President, Commodities		
Other: _____			
Contact Address (if R.R., give Lot, Concession No. and Township) 5420 North Services Road, Suite 501			
City Burlington	Province/State Ontario	County Canada	Postal/Zip Code L7L 6C7
Phone Number 905-319-1717	FAX Number 905-319-7980	E-Mail Address yuan.masse@energyadvantage.com	

8. Licensing History

a) Has the Applicant or an affiliate been licenced by the Ontario Energy Board?			Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
b) If yes, please provide the following information:				
Company Name	Business Activity	Licence / Registration No.		
ENERGY ADVANTAGE INC.	Electricity	ER-2000-0058		
" " "	Gas	GM-2003-0221		
c) Has the Applicant or an affiliate marketed or sold electricity or natural gas in any other jurisdiction? If yes, provide the following information:			Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Company Name	Jurisdiction	Business Activity	Licence / Registration No.	