

Ontario Energy Board Commission de l'Énergie de l'Ontario

Application for Licence to Market Natural Gas

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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For Office Use Only			
Application Number EB- 2008-03a			
Date Received	Sept. 10/08		

A. General information	ONTARIO STATEROVANA		10,10,
1. Licence Name	ONTARIO EVERGY BOARD		* *
Name to Appear on Licence:	PLANET ENERGY	(ONTARIO) COI	i
2. Primary Contact for this		(UNIARIO) CON	R.P.
Mr. Mrs. Last N Miss Ms. Desitio	ame: Gaffney	Full First Name: Christopher	Initial:
Other: Contact Address (if R.R., give Lo	t, Concession No. and Township)	esident & Chief Logal	Officer
City		, 10,76 000	
Mississauga	Province/State On to 15	Country Canada	Postal/Zip Code
Phone Number 299-360-3002	FAX Number 905-755-0545	E-mail Address Ca ffrey & planeten	4523K6
3. Type of Application		7 - 7	1177.64
New licence			
Renewal			~
4. Business Classification			
Sole Proprietor			
Partnership			
Corporation			-
Other (describe):			

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<u>5.</u>		~	140	3111	63

The standard gas marketer licence authorizes the licensee to conduct business using the company naticence is held. It also provides for the use of trade names by a licensed retailer.	ime under wh	ich the
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 marketing natural gas. Planet Energy		

6. Type of Licence

Licence to act as Agent Only a) Do you intend to market natural gas to low-volume consumers (consuming 50,000m³ or less per yes No year) in Ontario? b) Do you currently have contracts with low-volume consumers? C) Do you currently have an arrangement with a natural gas distributor to supply gas on behalf of low-volume consumers? d) Do you intend to act as an Agent? Yes No Do you currently offer contracts to act as an agent? Yes No Do you currently offer contracts to act as an agent?	Licen	nce to market natural gas			
year) in Ontario? Do you currently have contracts with low-volume consumers? Yes No Do you currently have an arrangement with a natural gas distributor to supply gas on behalf of low-volume consumers? Do you intend to act as an Agent? Po you currently offer contracts to act as an agent? Yes No Po you currently forest natural gas to low-volume 50,000m³ or less per Yes No No Po you currently have contracts with low-volume consumers? Yes No Po you currently forest natural gas to low-volume 50,000m³ or less per Yes No Po you currently have contracts with low-volume consumers? Yes No Po you currently forest natural gas distributor to supply gas on behalf of low-Yes No Po you currently offer contracts to act as an agent? Yes No		Licence to act	t as Agent Only		
c) Do you currently have an arrangement with a natural gas distributor to supply gas on behalf of low-volume consumers? d) Do you intend to act as an Agent? Pes No No Pes No P			100m³ or less per		
d) Do you intend to act as an Agent? Yes No Do you currently offer contracts to act as an agent? Yes No Yes No					No P
e) Do you currently offer contracts to act as an agent? Yes No Yes No Yes No	C)	Do you currently have an arrangement with a natural gas distributor to supply gavelume consumers?	as on behalf of low-		No
res No	d)	Do you intend to act as an Agent?		Yes	No
	e)	Do you currently offer contracts to act as an agent?		_	No

B. Information about the Applicant

Phone Number

789-360-3002 905-755-0545-

7. Applicant a) Application on behalf of Full Legal Name of Organization Ontario or other Jurisdiction Corporation Date of Formation or Number or Business Registration Number PLANET ENERGY (ONTARIO) Incorporation 002122494 December 19, 2006 b) Business Address (if different from Contact Address in Question 2 above). If R.R., give Lot, Concession No. and 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 City **Province** Country 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. Mrs. D Last Name: Miss Other: Contact Address (if R.R., give Lot, Concession No. and Township) 10 Kingsbridge Garden Circle, Guite 800 Mississauga City Province/State Country Postal/Zip Code Ontars Canada L5R 3K6

E-Mail Address (if applicable)

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,00-7770000077520077440077000700077000770007		Licence / Registration No.			
atario) Corp.	Electricity Retailer	ER-2008-0341			

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c) Has the Applicant or an affiliate marketed or sold electricity or natural gas in any other jurisdiction? If Yes No yes, provide the following information:					
Jurisdiction	Business Activity	Licence / Registration No.			
British Colonbia	Natural Gras Retailer	A-24-07			
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	iate marketed or so formation.	iate marketed or sold electricity or natural gas in any other jurisdi			