



Ontario Energy Board
Commission de l'Énergie de l'Ontario
**Application for Electricity
Wholesaler 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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EB-2009-0093

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File No:	Sub File: 1
Panel	
Licensing	TA
Other	
00/04	

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MAR 18 2009

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Application Number	EB-2009-0093
Date Received	March 19/09

A. General Information

1. Licensee Name

Name to Appear on Licence: DC Energy, LLC

2. Primary Contact for this Application

Mr. <input checked="" type="checkbox"/> Mrs. <input type="checkbox"/>	Last Name: Wilde	Full First Name: Dean	Initial: L.
Miss <input type="checkbox"/> Ms. <input type="checkbox"/>	Position Held: Managing Director & CEO		
Other: _____			

Contact Address (if R.R., give Lot, Concession No. and Township)

Street 8065 Leesburg Pike, Suite 500

City Vienna	Province/State VA	Country USA	Postal/Zip Code 22182
Phone Number 703-506-3902	FAX Number 703-506-3905	E-mail Address wilde@dc-energy.com	

3. Type of Application Process

New licence	<input checked="" type="checkbox"/>
Renewal	<input type="checkbox"/>
Additional information for an existing application	<input type="checkbox"/>

4. Business Classification

Sole Proprietor	<input type="checkbox"/>
Partnership	<input type="checkbox"/>
Corporation	<input checked="" type="checkbox"/>

Other (describe):

B. Information about the Applicant

5. Applicant Organization

a) Application on behalf of: DC Energy, LLC

Full Legal Name of Organization

DC Energy, LLC

Ontario Corporation Number or Business
Registration Number (from MCCR)

170672638 (BIN from MCBS)

Date of Formation or
Incorporation

06/18/2007

b) Business Address 8065 Leesburg Pike, Suite 500

City

Vienna

Province/State

Virginia

Country

U.S.A.

Postal/Zip Code

22182

Phone Number

703-506-3901

FAX Number

703-506-3905

E-mail Address (optional)

c) Address for Service in Ontario, if different from Business Address in question 5 b). If R.R. give Lot, Concession
Number and Township. NOT APPLICABLE

City

Province/State

Country

Postal/Zip Code

Phone Number

FAX Number

E-mail Address (optional)