

EW Ap. 1 16107



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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For Office Use Only	
Application Number	EB- 2007 -0605
Date Received	APR. 16/07

A. General Information

1. Licensee Name

Name to Appear on Licence: AMERICAN WATER CANADA CORP.

2. Primary Contact for this Application

Mr. <input checked="" type="checkbox"/>	Mrs. <input type="checkbox"/>	Last Name:	Full First Name:	Initial:
Miss <input type="checkbox"/>	Ms. <input type="checkbox"/>	<u>GARY</u>	<u>HOUGHTON</u>	<u>O.</u>
Other: _____		Position Held: <u>PROJECT DIRECTOR - LAKE HURON AND ELGIN WATER SUPPLY SYSTEM</u>		

Contact Address (if R.R., give Lot, Concession No. and Township)			
Street <u>P.O. Box 368, 7155 BLUEWATER HIGHWAY</u>			
City <u>GRAND BEND</u>	Province/State <u>ONTARIO</u>	Country <u>CANADA</u>	Postal/Zip Code <u>N0M 1T0</u>
Phone Number <u>519-238-8466</u>	FAX Number <u>519-238-5396</u>	E-mail Address <u>ghoughtoncamwater.com</u>	

3. Type of Application Process

New licence	<input type="checkbox"/>
Renewal	<input checked="" 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: <u>AMERICAN WATER CANADA CORP.</u>			
Full Legal Name of Organization <u>AMERICAN WATER CANADA CORP.</u>		Ontario Corporation Number or Business Registration Number (from MCCR) <u>1377198</u>	Date of Formation or Incorporation <u>1999-09-30</u>
b) Business Address <u>701 MAIN ST. W., SUITE 100</u>			
City <u>HAMILTON</u>	Province/State <u>ONTARIO</u>	Country <u>CANADA</u>	Postal/Zip Code <u>L8S 1A2</u>
Phone Number <u>905-521-4625</u>	FAX Number <u>905-521-9613</u>	E-mail Address (optional) <u>jmcintyre@amwater.com</u>	
c) Address for Service in Ontario, if different from Business Address in question 5 b). If R.R. give Lot, Concession Number and Township.			
City	Province/State	Country	Postal/Zip Code
Phone Number	FAX Number	E-mail Address (optional)	

6. Licensing History

a) Does the Applicant have any affiliates that operate in Ontario? Yes No
 (The term "affiliate", with respect to a corporation, has the same meaning as in the *Business Corporations Act*, RSO 1990, Chapter B.16)

b) If the response to 6a) is yes, please provide the company name, function of the affiliate, and, if applicable, OEB licence number.
 ■ *Tecatec Environmental Ltd., subsidiary residuals management company*
 ■ *American Water Carbon Services Corp., subsidiary custom carbon regeneration company*
 ■ *Pine Point (Windsor) Limited, subsidiary biosolids pelletizer facility*

c) Does the Applicant or any affiliates of the Applicant operate in energy markets in other jurisdictions? Yes No
If yes, please list company name, jurisdiction, activities, and licence number.

d) Note the name and address of any known Federal, Provincial, or local government agency that may have any jurisdiction over the action to be taken in this application and a brief description of that authority.

e) Is the Applicant applying for any other licence from the OEB? Please specify. Yes No