



AECL **EACL**

2007 Oct 1

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OCT 25 2007

Chalk River Laboratories
Chalk River, Ontario
Canada K0J 1J0
(613) 584-8811

Laboratoires de Chalk River
Chalk River (Ontario)
Canada K0J 1J0
(613) 584-8811

ONTARIO ENERGY BOARD

**Board Secretary
Ontario Energy Board
2300 Yonge Street
P.O. Box 2319, 26th Floor
Toronto, On M4P 1E4**

Dear Sir/Madam:

Please find Atomic Energy of Canada Limited's (AECL) application for a Wholesaler License under Section 57 of the Ontario Energy Board Act. Please issue an interim order to issue AECL an emergency interim license under Sections 21 and 59 of the Ontario Energy Board Act without issuing a notice or holding a hearing. This emergency license is required for AECL to ensure reliable supply of electricity to AECL.

You will also find enclosed a cheque made payable to the Ontario Energy Board in the amount of \$800.00, as well as two copies each of 2005-2006 Annual Report, 2006-2007 Annual Report, and 2006-2007 to 2010-2011 Corporate Plan Summary.

Do not hesitate to contact me if I can be of further assistance.

Yours truly,

**T. Doherty,
Site Electrical System Owner/Operator, Site Landlord Systems
Chalk River Laboratories**

Encl.



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

Commission de l'Énergie de l'Ontario
2300 rue Yonge
C.P. 2319
Toronto, ON M4P 1E4
Téléphone: 1-888-632-6273
Télécopieur: (416) 440-7656

For Office Use Only	
Application Number	EB- 2007-0830
Date Received	Oct 25/07

A. General Information

1. Licensee Name

Name to Appear on Licence: Atomic Energy of Canada Limited

2. Primary Contact for this Application

Mr. <input checked="" type="checkbox"/> Mrs. <input type="checkbox"/>	Last Name: Doherty	Full First Name: Tom	Initial:
Miss <input type="checkbox"/> Ms. <input type="checkbox"/>	Position Held: Site Landlord Systems, Electrical Systems Owner/Operator		
Other: _____			

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

Street Chalk River Laboratories

City Chalk River	Province/State Ontario	Country Canada	Postal/Zip Code K0J 1J0
Phone Number 613-584-3311 x6269	FAX Number 613-584-8106	E-mail Address dohertyt@aecl.ca	

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:

Full Legal Name of Organization

Atomic Energy of Canada Limited

Federal

Ontario Corporation Number or Business
Registration Number (from MCCR)

31135

Date of Formation or
Incorporation

Continuance under CBCA

1977 Jul 8

b) Business Address 2251 Speakman Drive

City

Mississauga

Province/State

Ontario

Country

Canada

Postal/Zip Code

L5K 1B2

Phone Number

613-584-3311 x6269

FAX Number

613-584-8106

E-mail Address (optional)

dohertyt@aec1.ca

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?
(The term "affiliate", with respect to a corporation, has the same meaning as in the *Business Corporations Act*, RSO 1990, Chapter B.16)

Yes

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No

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b) If the response to 6a) is yes, please provide the company name, function of the affiliate, and, if applicable, OEB licence number.

c) Does the Applicant or any affiliates of the Applicant operate in energy markets in other jurisdictions?

Yes

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No

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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

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No

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