

FILE

14-998-EL-AGG

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PUCO



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May 4, 2017

PUCO
Docketing Division
180 East Broad Street
Columbus, OH 43215

To Whom It May Concern:

Enclosed is notification for a material change in the license/certification for Electric Advisors, Inc. Our CRES number is 14-998. We are requesting a change from Aggregators/Power Brokers to Power Broker only. As requested I have enclosed section A-1 for your records.

Please refer questions to tracypuglisi@electricadvisors.com or at 240 752-9272.

Sincerely,

Tracy Puglisi
Compliance Manager

This is to certify that the images appearing are an accurate and complete reproduction of a case file document delivered in the regular course of business.
Technician SU Date Processed MAY 10 2017



Public Utilities Commission

Original AGG Case Number	Version
14-098-EL-AGG	May 2016

RENEWAL APPLICATION FOR ELECTRIC AGGREGATORS/POWER BROKERS

Please print or type all required information. Identify all attachments with an exhibit label and title (Example: Exhibit C-10 Corporate Structure). All attachments should bear the legal name of the Applicant. Applicants should file completed applications and all related correspondence with the Public Utilities Commission of Ohio, Docketing Division; 180 East Broad Street, Columbus, Ohio 43215-3793.

This PDF form is designed so that you may input information directly onto the form. You may also download the form, by saving it to your local disk, for later use.

A. RENEWAL INFORMATION

A-1 Applicant intends to be certified as: (check all that apply)

☒ Power Broker ☐ Aggregator

A-2 Applicant's legal name, address, telephone number, PUCO certificate number, and web site address

Legal Name _____
Address _____
PUCO Certificate # and Date Certified _____
Telephone # _____ Web site address (if any) _____

A-3 List name, address, telephone number and web site address under which Applicant will do business in Ohio

Legal Name _____
Address _____
Telephone # _____ Web site address (if any) _____

A-4 List all names under which the applicant does business in North America

A-5 Contact person for regulatory or emergency matters

Name _____
Title _____
Business address _____
Telephone # _____ Fax # _____
E-mail address _____