

ORIGINAL

18-0991-GA-ABN

Ohio

Public Utilities
Commission

PUCO USE ONLY		
Date Received	Case Number	Version
		May 2016

FILE

ABANDONMENT APPLICATION FOR CRES PROVIDERS WITH NO EXISTING CUSTOMERS

Please print or type all required information. Identify all attachments with an exhibit label and title (Example: Exhibit A-2 EDU Notice). All attachments should bear the legal name (and any references to which the Applicant is doing business in Ohio), and should be included on the electronic copy provided. Applicants should file completed applications and all related correspondence with the Public Utilities Commission of Ohio, Docketing Division, 180 East Broad Street, Columbus, OH 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-1 List applicant's name, address, telephone, and web site address under which applicant is certified to do business in Ohio**

Name Better Cost Control, LLC

Address 2274 Washington St

Telephone Number (617) 862-0213

Web site address http://www.bettercostcontrol.com

PUCO Certification Case # and Certificate # 15-1664-GA-A66

Date Applicant Will Cease Operations 4/30/2018

PUCO

2018 JUN -5 PM 1:50

RECEIVED-DOCKETING DIV.

- A-2 Exhibit A-2 "EDU Notice" provide a copy of the written notice provided to each EDU in each certified territory the CRES provider operates of its intent to cease providing service pursuant to Rule 4901:1-24-12 (B) (2) of the Ohio Administrative Code. If you are not registered with any EDU, proceed to A-3 "Affidavit."**

- A-3 Exhibit A-3 "Affidavit" provide a signed and notarized affidavit that the CRES provider is not serving any retail customers in the State of Ohio.**

- A-4 Contact person for regulatory/abandonment matters**

Name Steve Garson

Title Managing Member

Business address 2274 Washington St, Newton, MA 02462

Telephone number (617) 862-0213 Fax # (617) 332-3881

E-mail address steve.garson@gmail.com

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 MN Date Processed JUN 05 2018

The Public Utilities Commission of Ohio

RETAIL NATURAL GAS SUPPLIER/GOVERNMENTAL AGGREGATOR FILING COVER FORM POST INITIAL CERTIFICATION

In the Matter of the Application of)
 Better Cost Control, LLC) Case No. 15 - 1664 -GA- AGG
)
 to: the PUC of Ohio)

Name of Applicant: Better Cost Control, LLC

Applicant's Address: 2274 Washington St., Newton, MA 02462

Contact Person or Counsel: Steve Garson

Telephone Number: 617-862-0213

Mark the reason for filing this form, application, and supporting information. Check only one of the five main categories. Use separate copies of this form for each type of application.

1. ☐ Certification Renewal Application (to be filed 30 to 60 days prior to expiration of current certificate) per Rules 4901:1-27-09 and 4901:1-27-04 of the Ohio Administrative Code.
2. ☐ Notification of Material Change in Business (to be filed in the initial or most recent certification docket and within 30 days of the material change occurring) per Rule 4901:1-27-11 of the Ohio Administrative Code. Please check the following material change(s) that is(are) involved with this filing:
 - ☐ Change in ownership of five percent or more
 - ☐ Affiliation with public utility or change in affiliation with a public utility in this state
 - ☐ Retirement or other long-term changes to supply sources
 - ☐ Revocation, restriction, or termination of interconnection or service agreement with pipeline company or natural gas company
 - ☐ Fall of bond rating below BBB-
 - ☐ Fall of bond rating below Baa3
 - ☐ Filed or intend to file for some form of bankruptcy
 - ☐ Receipt of judgment, finding, or ruling that could affect fitness or ability to provide service
 - ☐ Other (please describe):
3. ☐ Certificate Transfer Application per Rule 4901:1-27-12 of the Ohio Administrative Code.
4. ☒ Abandonment Application (to be filed at least 90 days prior the effective date of the abandonment) per Rule 4901:1-27-12 of the Ohio Administrative Code. Please indicate which of the following two situations applies to the proposed abandonment:
 - ☒ Seek to abandon operations with no existing customers
 - ☐ Seek to abandon operations with existing customers
5. ☐ Other application (please describe):

The Public Utilities Commission of Ohio

RETAIL NATURAL GAS SERVICE SUPPLIER/GOVERNMENTAL AGGREGATOR OPERATIONS AND CERTIFICATE ABANDONMENT APPLICATION

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

SECTION A - GENERAL INFORMATION

A-1 Applicant Information:

Name Better Cost Control, LLC

Address 2274 Washington St., Newton, MA 02462

Telephone # 617-862-0213

Web site address

PUCO Certification Case #

Certificate # 15-473G (1)

A-2 Contact person for regulatory or emergency matters:

Name Steve Garson

Title Managing Member

Business Address 2274 Washington St

Telephone # 617-862-0213

Fax # 617-332-3881

Email Address steve.garson@gmail.com

SECTION B - OPERATIONS/SERVICE INFORMATION

B-1 Date Applicant Will Cease Operations. April 30, 2018

B-2 Are customers being switched back to LDC ☐ **or contracts assigned** ☒ **?**

B-3 If contracts were/will be assigned, to whom? Not applicable. Broker only

B-4 In which month's billing cycle will the customers be switched? Not applicable

B-5 Indicate total number of Ohio customers currently served 0 **, and by service territory:**

CGO

DEO

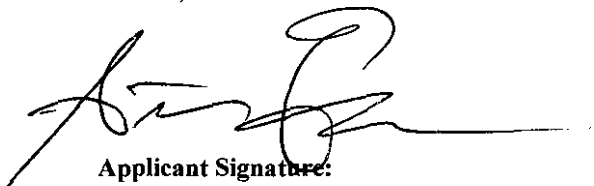
DUKE

VEDO

- B-6** Pursuant to Rule 4901:1-27-12 (B), applicant acknowledges that all contract terms and conditions were fulfilled prior to abandoning the operations provided under its certificate, or applicant has assigned such contracts to another retail natural gas supplier to fulfill the unexpired contract terms and conditions. YES ☐ NO ☐

SECTION C - EXHIBITS

- C-1** Exhibit C-1 "Notice to Director of the Consumer Services Department" provide a dated copy of the written notice that notified PUCO Department Director of Applicant's intent to assign customer contracts, pursuant to Rule 4901:1-29-10(D)(1)(a) of the Ohio Administrative Code.
- C-2** Exhibit C-2 "LDC Notice" provide a dated copy of the written notice provided to each LDC in each certified territory the CRNGS supplier operates of its intent to cease providing service pursuant to Rule 4901:1-27-12(B)(2) of the Ohio Administrative Code.
- C-3** Exhibit C-3 "Customer Notice" provide a dated copy of the notice that notified customers of the company's intent to abandon service pursuant to Rule 4901:1-27-12(B)(3); and if applicable, provide a dated copy of the notice that also notified customers of the company's intent to assign contracts to another supplier.
- C-4** Exhibit C-4 "Affidavit" provide a signed and notarized affidavit (*approved form attached herein*).



Applicant Signature:

Title: Managing Member

Date: May 25, 2018

The Public Utilities Commission of Ohio

RETAIL NATURAL GAS SERVICE SUPPLIER/GOVERNMENTAL AGGREGATOR OPERATIONS AND CERTIFICATE ABANDONMENT AFFIDAVIT EXHIBIT C-4

AFFIDAVIT

In the Matter of the Application of)
Better Cost Control LLC) Case No.
 To Abandon Retail Natural Gas Service Supplier)
 Or Ohio Natural Gas Governmental Aggregation)
 Operations and Certificate in Ohio.)

County of *Norfolk*
 State of *Massachusetts*

Steve Garson Affiant, being duly sworn/affirmed according to law, deposes and says that:
 He/She is the *MANAGING member* (Office of Affiant) of *Better Cost Control LLC*
 (Name of Applicant).

1. Affiant is authorized to and does make this affidavit for said Applicant.
2. Applicant herein attests under penalty of false statement that all statements made in the application are true and complete.
3. Affiant further sayeth naught.

[Signature] *managing member*
 Affiant Signature & Title

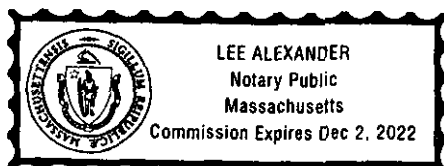
Sworn and subscribed before me this *25th* day of *May* Month *2018* Year

Signature of Official Administering Oath

[Signature]

Print Name and Title

LEE ALEXANDER
Assistant Branch Manager



My commission expires on *12/02/2022*