

**Filing Instructions for Retail Electric Brokers**

**I. Where to File:** Applications should be filed in the Commission’s electronic filing system, DelaFile, which can be accessed at <https://delafile.delaware.gov/>

**II. What to File:** Applicant must use the attached formto submit the Application. (Please remove this instruction sheet prior to filing). To submit an application please provide the **$750 non-refundable application fee**, all exhibits, affidavits, and other attachments. All exhibits should be clearly identified. For example, Exhibit A should be marked “Exhibit A – Delaware Certificate of Good Standing.” Each exhibit should be attached as a separate document to the filing in DelaFile.

**III. Confidentiality:** All information disclosed in this application is considered public information unless specifically labeled confidential. The Applicant has the responsibility to disclose to the Commission Secretary what is privileged or confidential information not otherwise available to the public. The Applicant should **attach in DelaFile one copy of all confidential information, documents should be stamped “CONFIDENTIAL” at the top in clear and conspicuous letters, the security level in DelaFile for this document should be designated “confidential”; a separate redacted version of all confidential documents should be attached to the filing in DelaFile, and the security level in DelaFile should be designated “public.”** If your Application includes confidential information, please complete Attachment C. For more information, see 26 *Del. Admin. C.* § 1001 – Rules of Practice and Procedure of the Delaware Public Service Commission.

**IV. Material Changes:** Applicants shall inform Staff of any material changes in any information submitted in the Application that occur from the time the application is submitted to the time the Commission considers the Application. Failure to provide such notice within ten (10) Business Days after any material change may be grounds for rejection of this Application.

**Questions regarding this application:** Please contact Clishona Marshall (302) 736-7539 or email at Clishona.Marshall@delaware.gov or Malika Davis at (302) 736-7521 or email at Malika.Davis@delaware.gov.

**Incomplete Applications or those not including the necessary fees, supporting documentation or information may be rejected and processing delayed. The Applicant should then refile the Application with the required information and filing fee.**

**If the Application when submitted and reviewed is found to be deficient the Applicant will be given the opportunity to provide the additional information; however, an incomplete or abandoned Application will be closed four (4) months after the initial filing date, unless such time period is extended by the Commission.**

**REFER** **TO 26 *Del. Admin. C****.* **§ 3001 FOR SPECIFIC INFORMATION REQUIRED. UNLESS OTHERWISE NOTED, CAPITALIZED TERMS SHALL HAVE THE MEANINGS ASCRIBED TO THEM IN 26 *Del. Admin. C.* § 3001. COMMISSION STAFF MAY REQUEST ADDITIONAL INFORMATION IN ORDER TO COMPLETE THE PROCESSING OF THE APPLICATION.**



**Company Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Company Website:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Tax identification number:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Company Mailing Address**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Company Street Address** (if different): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Legal name of Applicant and the name under which the Applicant proposes to do business in Delaware.**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ d/b/a \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Name

**🞏** Applicants with a d/b/a must submit a copy of the Registration of Trade, Business & Fictitious Name Certificate for each of the three Delaware counties.

 Provided in **Exhibit \_\_\_\_\_**

* Provide a list of names under which the Applicant, its Affiliated Interests, or any current or previous officer, director, or manager has previously done business in Delaware. Provided in **Exhibit \_\_\_\_\_**
1. **State of Formation Certifications:**

 State of Formation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* Provide a Certificate of Good Standing issued by the Secretary of State of the state of formation or incorporation (if different from the State of Delaware) dated within the past 12 months certifying that the Applicant is in good standing and qualified to do business in the state of formation or apply for a waiver of this requirement. Provided in **Exhibit \_\_\_\_\_**
* Provide a copy of the Applicant’s Business License certifying that the Applicant is registered and/or qualified to do business in the state of formation or incorporation (if different from the State of Delaware) or apply for a waiver of this requirement. Provided in **Exhibit \_\_\_\_\_**
1. **Authority to do Business in Delaware:**
* Provide a Certificate of Good Standing issued by the Delaware Secretary of State dated within the past 12 months certifying that the Applicant is in good standing and qualified to do business in Delaware. Provided in **Exhibit \_\_\_\_\_**
* Provide the **permanent** copy of the Applicant’s Delaware Business License certifying that the Applicant is registered and/or qualified to do business in Delaware. Provided in **Exhibit \_\_\_\_\_**
1. **Delaware Registered Agent:**

Each Applicant shall provide a designation in writing of the name and address of a person resident within the State of Delaware upon which service of any notice, order or process may be made. This information must be updated if changed.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Name

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Email Address

1. **Leadership:**

Provide the names, titles, addresses, and telephone numbers of the Applicant’s principal officers, directors, partners, or other similar officials. Provided in **Exhibit \_\_\_\_\_**

1. **Corporate Structure:**

Each Applicant shall provide a description of the Applicant’s corporate structure, including all parent, affiliated, and subsidiary companies. **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Additionally, a graphical depiction of such structure is **required**. Provided in **Exhibit \_\_\_\_\_**

1. **Regulatory Contact Person:** This person will be the Commission’s main point of contact and the initial point of contact regarding this Application. The Commission will also send any correspondence to this person.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Name of Regulatory Contact

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Title

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Telephone Number Email Address

1. **Complaint Contact Person:** If contact is different from the Regulatory Contact. This person will ordinarily be the initial point of contact for resolving complaints filed with the Commission.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Name of Complaint Contact

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Title

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Telephone Number Email Address

1. **Applicant’s Attorney:** This person may be the secondary contact for resolving complaints filed with the Commission. The Commission may also send correspondence to this person. This information is required to be updated if there is a change.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Name of Attorney

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Firm

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Address

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Telephone Number Email Address

 **🞏** No Attorney

1. **Toll-Free Telephone Number of Applicant’s Customer Service Department:** This number will be listed on the Commission’s website as a resource for existing and potential customers.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Toll-free customer service number

1. **Consent to Jurisdiction:**

Applicant consents to the jurisdiction of the Delaware courts for acts or omissions arising from the Electric Supplier’s and its Agent’s activities in the State of Delaware.

­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

By (signature)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Typed or Printed Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title

1. **Criminal Activities Statement:**

**🞏** A statement detailing any criminal activities, except for misdemeanors or lesser violations, of which the Applicant, any of its Affiliated Interests, officers, and directors (and prior officers and directors who left the Applicant’s employ less than three (3) months before the filing of the application) have been convicted. Any criminal disclosure shall include a copy of any order of conviction and restitution. Provided in **Exhibit \_\_\_\_\_**

**🞏** A statement detailing any pending charges, except for misdemeanors or lesser violations, against the Applicant, any of its Affiliated Interests, officers, and directors. Provided in **Exhibit** \_\_\_\_\_

**🞏** Neither the Applicant nor its affiliated interests, officers or directors have been charged or convicted of any felonies.

1. **Certified Financial Statements and other Indicia of Financial Capability:** Applicants submitting European-style financial statements shall include a statement of similarity.

**🞏** Provide copies of certified financial statements (balance sheet, income statement, statement of cash flows current within twelve (12) months of the filing). Provided in **Exhibit \_\_\_\_\_** (If publicly traded the Applicant must submit the certified financial statements AND its most recent annual report to the shareholders and SEC Form 10-K, or a link to the report on the SEC website. If not publicly traded, the Applicant must submit the accounting statements, including balance sheet and income statement, audited financial statements, bank account statements, tax returns or other indicia of financial capability, or if applicable, the certified financial statements of a publicly traded parent.)

 **🞏** Other indicia of financial capability submitted in support of the application (should be current within twelve (12) months of the filing). Provided in **Exhibit \_\_\_\_\_**

1. **Bankruptcy Disclosure:**

**🞏** See **Exhibit \_\_\_\_\_** for detailed statement of all bankruptcy proceedings filed by the Applicant in the past 24 months

**🞏** Neither the Applicant nor its Affiliated Interests has filed bankruptcy in the past 24 months

1. **Compliance with Regional Requirements:**

**🞏** Applicant agrees to only work with an entity that complies with PJM’s requirements and is a Certified Electric Supplier in Delaware.

 Provide a list of Electric Suppliers through which the Applicant intends to arrange for the sale of electricity (**any change to this list must be updated with the Commission within five (5) Business Days of the change**):

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **Description of the Nature of the Business Being Conducted:** Description of service, types of customers and geographic area to be served.

Description of service:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*If more space is required please attach a separate sheet of paper with the above information. **Provided in Exhibit \_\_\_\_\_**

Types of Customers: *Check all that apply*

 **🞏** Residential **🞏** Large Commercial

 **🞏** Industrial **🞏** Small Commercial

 Geographic Area: *Applicant should check one or both*

 **🞏** Delmarva Power & Light Service Territory

 **🞏** Delaware Electric Cooperative Services Territory

1. **Relevant Retail Experience of Each Principal Officer Responsible for Delaware Operations:** In order to fulfill the requirements of the Supplier Rules, an Applicant must present substantial evidence of technical and managerial competency. The Applicant must submit, in an attachment, **detailed professional resumes including dates, jobs/ job titles and duties for each principal officer responsible for operations in Delaware.**

**🞏** Provided in **Exhibit \_\_\_\_\_**

1. **List of States Presently Selling Electric Supply/Broker Services and a List of State with Pending Applications:** Please provide a list of the states in which the Applicant, or any of its affiliates, is now or has been engaged in the retail sale of electricity, status of the application (approved or pending), type of license, license number (if approved) or commission docket number (if pending):

 State: \_\_\_\_\_\_ Status: \_\_\_\_\_ Type of License: \_\_\_\_\_\_\_\_ License No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Issued: \_\_\_\_\_\_\_

 State: \_\_\_\_\_\_ Status: \_\_\_\_\_ Type of License: \_\_\_\_\_\_\_\_ License No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Issued: \_\_\_\_\_\_\_

 State: \_\_\_\_\_\_ Status: \_\_\_\_\_ Type of License: \_\_\_\_\_\_\_\_ License No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Issued: \_\_\_\_\_\_\_

 State: \_\_\_\_\_\_ Status: \_\_\_\_\_ Type of License: \_\_\_\_\_\_\_\_ License No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Issued: \_\_\_\_\_\_\_

 State: \_\_\_\_\_\_ Status: \_\_\_\_\_ Type of License: \_\_\_\_\_\_\_\_ License No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Issued: \_\_\_\_\_\_\_

 State: \_\_\_\_\_\_ Status: \_\_\_\_\_ Type of License: \_\_\_\_\_\_\_\_ License No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Issued: \_\_\_\_\_\_\_

\*If more space is required please attach a separate sheet of paper with the above information. Provided in **Exhibit \_\_\_\_**

\*\*Applicant is required to provide a copy of any order or decision from the state’s public utility commission for each state listed above. Provided in **Exhibit \_\_\_\_**

1. **List of States in Which Applicant has Received Authority to Sell/Broker Services but is not Currently Providing Services.**

 State: \_\_\_\_\_\_ Status: \_\_\_\_\_ Type of License: \_\_\_\_\_\_\_\_ License No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Issued: \_\_\_\_\_\_\_

 State: \_\_\_\_\_\_ Status: \_\_\_\_\_ Type of License: \_\_\_\_\_\_\_\_ License No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Issued: \_\_\_\_\_\_\_

 State: \_\_\_\_\_\_ Status: \_\_\_\_\_ Type of License: \_\_\_\_\_\_\_\_ License No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Issued: \_\_\_\_\_\_\_

 State: \_\_\_\_\_\_ Status: \_\_\_\_\_ Type of License: \_\_\_\_\_\_\_\_ License No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Issued: \_\_\_\_\_\_\_

 \*Applicant shall provide a copy of any order or decision from the state’s public utility commission for each state listed above. Provided in **Exhibit \_\_\_\_**

1. **List of States or federal jurisdictions in which the Applicant or any of its Affiliated Interest has been found to be in violation of laws, rules, or regulations.** Provided in **Exhibit \_\_\_\_\_**
2. **Please provide a copy of any settlement, adjudication, or court order with respect to an action filed by a state Attorney General, the Federal Trade Commission, or U.S. Department of Justice concerning the Applicant’s participation in retail and federal electricity, natural gas, or telecommunications markets.** Provided in **Exhibit \_\_\_\_\_**
3. **Other Proceedings:** List of states or federal jurisdictions in which Applicant or its Affiliated Interests has been denied approval and/or had authority revoked and the case number, venue, and final orders and settlement agreements for each case identified.

State: \_\_\_\_\_\_ Case Number: \_\_\_\_\_\_\_\_\_\_\_ Venue: \_\_\_\_\_\_\_\_ Final Order No: \_\_\_\_\_\_\_\_\_\_\_\_ Date Issued: \_\_\_\_\_\_\_

 State: \_\_\_\_\_\_ Case Number: \_\_\_\_\_\_\_\_\_\_\_ Venue: \_\_\_\_\_\_\_\_ Final Order No: \_\_\_\_\_\_\_\_\_\_\_\_ Date Issued: \_\_\_\_\_\_\_

\*If the Applicant has been denied approval or had its authority revoked by a state Commission, please provide a detailed explanation for each state. Provided in **Exhibit \_\_\_\_\_**

 **🞏** Applicant has never been denied or revoked

1. **Pending Proceedings for Revocation/Suspensions:** Applicant shall provide a list of proceedings in which a revocation or suspension of authority to sell or broker electricity is pending for the Applicant or its Affiliate Interests.

State: \_\_\_\_\_\_ Case Number: \_\_\_\_\_\_\_\_\_\_\_ Venue: \_\_\_\_\_\_\_\_\_\_\_\_

 State: \_\_\_\_\_\_ Case Number: \_\_\_\_\_\_\_\_\_\_\_ Venue: \_\_\_\_\_\_\_\_\_\_\_\_

 **🞏** Additional information, including any orders or notices, provided in **Exhibit \_\_\_\_\_**

1. **Security:** The Commission may determine that an Applicant requesting to be a Broker is required to post security in the amount of $10,000 in order to ensure that the Applicant has sufficient financial ability to operate as a Broker in the State of Delaware. This will be determined on a case-by-case basis.
2. **Any other Information:**

**🞏** Other material submitted in support of the Application. Provided in **Exhibit \_\_\_\_\_**

**🞏** No other supporting material is provided

1. **Verification of Application:** The Application must be accompanied by a signed, notarized verification of a principal officer of the Applicant stating that all information in the Application is true and correct as filed to the best of the principal’s or officer’s belief. Where the Applicant is a corporation or an association, the verification shall be signed by an officer thereof and notarized. (*See Attachment A for an example)*

 **🞏** Verification is provided in **Exhibit \_\_\_\_\_**

1. **Waiver of Certification Requirements:** Only applicable to Applicants requesting a waiver.

**🞏** Applicant requests a waiver of the requirements in Section(s) \_\_\_\_\_ of the Supplier Rules. Please provide a detailed explanation and supporting documentation in support of the request.Provided in **Exhibit \_\_\_\_\_**

**🞏** No waiver requested

1. **Marketing Plans and Materials:** If the Applicant intends to serve Residential and Small Commercial Customers, the Applicant shall provide the marketing plan and all marketing materials (please see Reg. 49, Supplier Rule - **Sections 2.2.13 – 2.2.14** for a complete list of materials to be submitted).

 Proposed Marketing Method (*check all that apply*)

* Door-to-Door
* Telemarketing
* Direct mail
* Other marketing channels (provide method in description below)

Please provide a description of the marketing plan(s) the Applicant plans to use in Delaware. Identify any third party vendors that the Applicant will utilize and provide a copy of any scripts utilized by the Company or its representatives . Additionally, please include the manner in which the Applicant will ensure oversight, training, and compliance with the Supplier Regulations.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 **🞏** Scripts andAdditional information provided in **Exhibit \_\_\_\_\_**

1. **General Compliance:** Please complete the “Affidavit of General Compliance” in Attachment B.

**REPORTING REQUIREMENTS FOR BROKERS**

Applicant agrees to provide the following information to the Commission:

* Electric Supplier Annual Report Due April 30th of each year
* Annual Financial Report due April 30th of each year
* Required 10-Day notifications provided in 26 *Del. Admin. C.* § 3001 section 12.2
* Required 30-Day notifications provided in 26 *Del. Admin. C.* § 3001 section 12.3

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

By (signature)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Typed or Printed Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title

Attachment A

 **VERIFICATION**

STATE OF       )

 ) SS

COUNTY OF       )

 On this \_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_, personally came before me, the subscriber, a Notary Public in and for the state and county aforesaid, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [name of individual who is signing] as the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [authority of individual or title of individual who is signing, e.g., President, Vice President, Sole Member/Manager, Trustee, etc.] of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [name of company or entity that is filing], known to me personally to be such or having presented to me satisfactory evidence of identity, and acknowledged this document to be [his or her] act and deed and the act and deed of such \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [type of filer, e.g. corporation, limited liabilty company, etc.], that the signature of such individual is in [his or her] own proper handwriting, and that the facts set forth in this \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [type of filing, e.g., application, petition, etc.] are true and correct to the best of [his or her] knowledge, information, and belief.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature of individual

 Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SIGNED AND SWORN (OR AFFIRMED)** before me on this \_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_, by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (name of individual who signed above).

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **SEAL**

Signature of Notarial Officer

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title (e.g., Notary Public)

My Commission Expires:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_

Attachment B

**AFFIDAVIT OF GENERAL COMPLIANCE**

STATE OF       )

 ) SS

COUNTY OF       )

, Affiant, being duly [sworn/affirmed] according to law, deposes and says that:

He/she is the (Office of Affiant) of (Name of Applicant);

That he/she is authorized to and does make this affidavit for said Applicant;

That the Applicant herein certifies to the Commission that:

The Applicant agrees to comply with all applicable Federal and state consumer protection and environmental laws and regulations, and Delaware PSC regulations, fees, assessment, and reporting requirements;

The Applicant has obtained all the licenses and permits required to operate the proposed business in the State of Delaware;

That the Applicant has the burden of producing information and supporting documentation demonstrating its technical and financial fitness to be certified as an Electric Supplier pursuant to 26 *Del. Admin. C.* § 3001;

That the Applicant has answered the questions on the application correctly, truthfully, and completely and provided supporting documentation as required;

That the Applicant acknowledges that it is under a duty to update information provided in answer to questions on this application and contained in supporting documents;

That the Applicant acknowledges that it is under a duty to supplement information provided in answer to questions on this application and contained in supporting documents as requested by the Commission and/or Commission Staff;

 That as a condition of receiving an Electric Supplier Certificate the Applicant agrees that it must comply with and ensure that its employees, agents, representatives, and independent contractors comply with the customer protections set forth in Commission regulations at 26 *Del. Admin. C.* § 3001, as well as any future amendments. Further, that Electric Suppliers and Brokers are responsible for any false, fraudulent, deceptive or unlawful marketing or billing acts performed by their Agents in the conduct of marketing or sales activities on behalf of the Electric Supplier or Broker; and

 That the facts above set forth are true and correct to the best of his/her knowledge, information, and belief and that he/she expects said Applicant to be able to prove the same at any hearing hereof.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature of individual

 Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SIGNED AND SWORN (OR AFFIRMED)** before me on this \_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_, by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (name of individual who signed above).

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **SEAL**

Signature of Notarial Officer

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title (e.g., Notary Public)

My Commission Expires:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_

Attachment C

**Attestation of** **Submission of Confidential, Proprietary, and Privileged Material**

**Per 26 *Del. Admin. C.* § 1001-1.11**

I, [NAME], [TITLE] of [COMPANY/ORGANIZATION], do hereby attest, under penalty of perjury, that [DESCRIPTION OF DOCUMENT / INFORMATION] is 1) not a “public record” as defined by 29 *Del. C.* § 10002(l) because it is [DESCRIPTION OF REASON AND SPECIFIC EXEMPTION UNDER 29 *Del. C.* § 10002(l)]; and 2) is not subject to inspection by either the public or by other parties unless an appropriate proprietary agreement is executed.

As such, I request that the Delaware Public Service Commission accord confidential treatment to [DESCRIPTION OF DOCUMENT / INFORMATION] in accordance with 26 *Del. Admin. C.* § 1001-1.11.

In compliance with 26 *Del. Admin. C.* § 1001-1.11.3, I have submitted, attached to this Attestation, for filing a copy of the document described above without the confidential information, with an indication that the claimed confidential information has been deleted.

Executed [DATE]

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[NAME]

[STATE]

[COUNTY]

Sworn to and subscribed before me on [DATE] by [NAME]

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [NOTARY SEAL]

[NOTARY NAME]

My commission expires: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Checklist of Required Items for Electricity Broker Applications – Applications may be rejected if documents are not available at the time of submission.**

[ ]  Registration of Trade, Business & Fictitious Name Certificate for each Delaware County where business is expected to be conducted **Exhibit** \_\_\_\_\_

[ ]  Certification Documents from the state of formation or incorporation **Exhibit** \_\_\_\_\_

[ ]  Delaware Certificate of Good Standing **Exhibit** \_\_\_\_\_

[ ]  Delaware Business License **Exhibit** \_\_\_\_\_

[ ]  Leadership Information **Exhibit** \_\_\_\_\_

[ ]  Graphical Depiction of Corporate Structure **Exhibit**\_\_\_\_\_

[ ]  Criminal Activities Statement **Exhibit** \_\_\_\_\_

[ ]  Certified Financial Statements (dated within one year of filing) **Exhibit** \_\_\_\_\_

[ ]  Publicly traded applicants – recent annual report and SEC Form 10-K **Exhibit** \_\_\_\_\_

[ ]  Not publicly traded applicants – accounting statements or other Indicia of

Financial Capability **Exhibit \_\_\_\_\_**

[ ]  Bankruptcy disclosure **Exhibit** \_\_\_\_\_

[ ]  Security Bond (if required by the Commission) **Exhibit** \_\_\_\_\_

[ ]  Relevant Retail Experience **Exhibit**\_\_\_\_\_

*\*If filed under confidential seal a redacted version and attestation (Attachment C) must be uploaded separately in DelaFile*

[ ]  Marketing Plans and Materials **Exhibit** \_\_\_\_\_

[ ]  Verification of Application (Attachment A) **Exhibit** \_\_\_\_\_

[ ]  Affidavit of General Compliance (Attachment B)

[ ]  Attestation of Submission of Confidential, Proprietary, and Privileged Material (Attachment C)

**Additional Items:**

[ ]  Description of the Nature of Business Being Conducted (if additional space is

required) **Exhibit \_\_\_\_\_**

[ ]  States presently selling electricity supply/broker services and pending applications (if additional space is required) **Exhibit \_\_\_\_\_**

[ ]  States in which authority to provide services has been received but not currently providing services (if additional space is required) **Exhibit** \_\_\_\_\_

[ ]  List of states of federal jurisdictions in which Applicant or any of its Affiliated Interests has been found in violation of laws, rules, or regulations **Exhibit \_\_\_\_\_**

[ ]  List of states in which Applicant has been denied approval and/or had authority revoked or suspended (detailed explanation) **Exhibit** \_\_\_\_\_

[ ]  Pending Proceedings **Exhibit** \_\_\_\_\_

[ ]  Waiver request **Exhibit** \_\_\_\_\_

[ ]  Other materials submitted in support of the Application **Exhibit** \_\_\_\_\_