



Stuart Ormsbee

Vice President

Colonial Power Group, Inc.

5 Mount Royal Ave., Suite 5-350

Marlborough, MA 01752

Phone 508-769-0880 (mobile)

sormsbee@colonialpowergroup.com

April 27, 2021

Executive Director
New Hampshire Public Utilities Commission
21 South Fruit Street, Suite 10
Concord, NH 03301

RE: Colonial Power Group - Registration as Load Aggregator

Dear Ms. Howland,

Colonial Power Group, Inc. ("Colonial") hereby submits an application with the Commission to register as a provider of electric aggregation service pursuant to N.H. Code Admin. Rules Puc 2006.02. Colonial provides energy advisory and procurement services to communities developing and maintaining municipal aggregation programs. Since its formation in 2002, Colonial has served as a municipal aggregator to more than 80 programs in Massachusetts.

Enclosed please find the following:

- An original and two copies of an Electric Load Aggregation Application Form;
- Certificate of Authority from the New Hampshire Department of State;
- Certificate of Good Standing from the New Hampshire Department of State;
- Check in the amount of \$250.00; and
- Electric Aggregator Assessment Exemption Claim Form.

If you have any questions or concerns, please do not hesitate to contact me.

Sincerely,

A handwritten signature in black ink, appearing to read "Stuart Ormsbee", with a long, sweeping horizontal line extending to the right.

Stuart Ormsbee



Electric Load Aggregation Application Form

This form may be used to: (1) apply for initial registration as an electric load aggregator in New Hampshire, (2) apply for renewal of registration as an electric load aggregator in New Hampshire, and (3) notify the Commission of any changes to information in a previously-filed electric aggregator application form. *This form is provided as a convenience for filing only; you are required to provide all information specified under Puc 2006.02 when applying for initial or renewal registration as an electric aggregator, but you are not required to use this form when doing so.*

| Indicate whether this application is for an initial registration or for a renewal. Initial <input checked="" type="checkbox"/> Renewal <input type="checkbox"/> | | |
|---|---|--|
| Applicant's General Information | | |
| Puc 2006.02(a) | Legal Name | Colonial Power Group, Inc. |
| | Trade Name (d/b/a) (if applicable) | |
| Puc 2006.02(b) | Business Mailing Address | 5 Mount Royal Ave, Ste 5-350 Marlborough, MA 01752 |
| | Telephone Number | 508-485-5858 |
| | E-Mail Address | admin@colonialpowergroup.com |
| | Website Address (if applicable) | colonialpowergroup.com |
| | | |
| Puc 2006.02(c) | Provide the name(s), title(s), business address(es), telephone number(s), and e-mail address(es) of the applicant, if an individual, or of the applicant's principal(s), ¹ if the applicant is anything other than an individual. Use additional sheets if your response exceeds the space provided on the form. | |
| | Name | Mark Cappadona |
| | Title | President and Director |
| | Business Mailing Address | 5 Mount Royal Ave, Ste 5-350 Marlborough, MA 01752 |
| | Telephone Number | 508-485-5858 |
| | E-Mail Address | mark@colonialpowergroup.com |
| | | |
| | Name | Denise Allard |
| | Title | Secretary, Director, and Sr. Vice President Operations |
| | Business Mailing Address | 5 Mount Royal Ave, Ste 5-350 Marlborough, MA 01752 |
| | Telephone Number | 508-485-5858 |
| | Email Address | denise@colonialpowergroup.com |
| | | |
| | Name | Karin Grinnell |
| | Title | Treasurer, Director, and Sr. Vice President Finance |
| | Business Mailing Address | 5 Mount Royal Ave, Ste 5-350 Marlborough, MA 01752 |
| | Telephone Number | 508-485-5858 |
| | E-Mail Address | kgrinnell@colonialpowergroup.com |

¹ "Principals" means, for a corporation, any of its officers, directors, or controlling shareholders, for a limited liability company, any of its managers or controlling members, for a partnership, any of its general partners, and for any other business entity, any of its personnel exercising executive functions and any of its controlling equity owners.



| Customer Service Contact | | |
|--------------------------|--|---------------------------------|
| Puc 2006.02(d) | Name | Stuart Ormsbee |
| | Title | Vice President |
| | Telephone Number | 508-485-5858 |
| | Toll-Free Telephone Number (if available) | 866-485-5858 |
| | E-Mail Address | sormsbee@colonialpowergroup.com |

| Customer Complaints Contact | | |
|-----------------------------|---------------------------------|------------------------------|
| Puc 2006.02(e)(1) | Name | Stuart Ormsbee |
| | Title | Vice President |
| | Business Mailing Address | 5 Mount Royal Ave, Ste 5-350 |
| | | Marlborough, MA 01752 |
| | Telephone Number | 508-485-5858 |
| E-Mail Address | sormsbee@colonialpowergroup.com | |

| Regulatory Compliance Matters Contact | | |
|---------------------------------------|---------------------------------|------------------------------|
| Puc 2006.02(e)(2) | Name | Stuart Ormsbee |
| | Title | Vice President |
| | Business Mailing Address | 5 Mount Royal Ave, Ste 5-350 |
| | | Marlborough, MA 01752 |
| | Telephone Number | 508-485-5858 |
| E-Mail Address | sormsbee@colonialpowergroup.com | |

| Commission Assessment Payments Contact | | |
|--|---------------------------------|------------------------------|
| Puc 2006.02(e)(3) | Name | Stuart Ormsbee |
| | Title | Vice President |
| | Business Mailing Address | 5 Mount Royal Ave, Ste 5-350 |
| | | Marlborough, MA 01752 |
| | Telephone Number | 508-485-5858 |
| E-Mail Address | sormsbee@colonialpowergroup.com | |

| Separate Attachments: Business Authority and Trade Name | |
|---|---|
| Puc 2006.02(f) | <p>Provide, as a separate attachment, evidence of the applicant's authorization to do business in New Hampshire from the New Hampshire secretary of state by submitting either of the following:</p> <p>(1) a recent printout of the applicant's listing on the N.H. Secretary of State website with the status "In Good Standing" or words of similar import; or</p> <p>(2) a copy of a certificate from the N.H. Secretary of State's office stating that the applicant is authorized to do business in New Hampshire.</p> |
| Puc 2006.02(g) | <p>Provide, as a separate attachment, evidence of the applicant's registration of the trade name, if any, to be used by the applicant in New Hampshire from the New Hampshire secretary of state by submitting either of the following:</p> <p>(1) a recent printout of the applicant's trade name on the N.H. Secretary of State website with the status "Active" and indicating that the trade name is owned by the applicant; or</p> <p>(2) a copy of a certificate from the N.H. Secretary of State's office indicating that the applicant has registered as doing business under the trade name.</p> |




| Statements Regarding Applicant and its Principals | | |
|---|---|----|
| Please respond to each of the following questions with either "Yes" or "No." | | |
| Puc 2006.02(h)(1) | Has applicant or any of its principals ever been convicted of any felony that has not been annulled by a court? | NO |
| Puc 2006.02(h)(2) | Has applicant or any of its principals, within the 10 years immediately prior to application, had any civil, criminal, or regulatory sanctions or penalties imposed against it, him, or her pursuant to any state or federal consumer protection law or regulation? | NO |
| Puc 2006.02(h)(3) | Has applicant or any of its principals, within the 10 years immediately prior to application, settled any civil, criminal, or regulatory investigation or complaint involving any state or federal consumer protection law or regulation? | No |
| Puc 2006.02(h)(4) | Is applicant or any of its principals currently the subject of any pending civil, criminal, or regulatory investigation or complaint involving any state or federal consumer protection law or regulation? | NO |
| Puc 2006.02(h)(5) | Has applicant or any of its principals been denied authorization to provide competitive electricity supply service or electric aggregation service in any other state or jurisdiction? | No |
| If an affirmative answer is provided to any item above, then provide a detailed explanation of the occurrence and the related circumstances. Use additional sheets as needed. | | |

| Other States | | |
|----------------|---|-----------|
| Puc 2006.02(i) | Please list other states or jurisdictions in which the applicant currently conducts business relating to the aggregation of electric customers. | MA AND RI |

| Statement Regarding Supplier Representation | | |
|---|--|----|
| Puc 2006.02(j) | Please respond to the following question with either "Yes" or "No." Is the applicant representing any supplier interest? | No |
| If the response to the preceding question is "Yes," please list the supplier(s) represented. Use additional sheets if needed. | | |

| Expected Marketing Start Date | | |
|-------------------------------|---|-------------------------|
| Puc 2006.02(k) | Provide the date upon which the applicant expects to commence marketing its services to customers in New Hampshire. | JUNE 2021 Date _____ |

| Attestation and Signature | | |
|---------------------------|---|---------------------------------|
| Puc 2006.02(l) and (m) | <p>BY SIGNING BELOW, THE APPLICANT REPRESENTATIVE CERTIFIES THAT IT HAS THE AUTHORITY TO FILE THE APPLICATION ON BEHALF OF THE AGGREGATOR AND ATTESTS THAT THE CONTENTS OF THE APPLICATION ARE TRUTHFUL, ACCURATE, AND COMPLETE.</p> <p> Signature of the applicant or its authorized representative</p> <p>Name: MARK CAPPADONA</p> <p>Title: PRESIDENT</p> | <p>4/27/2021 Date _____</p> |

| Filing Instructions | | |
|--|--|--|
| 1) Mail an original and two paper copies of this form and all separate attachments to: Executive Director, NHPUC, 21 South Fruit St., Suite 10, Concord, NH 03301 | | |
| 2) E-mail a PDF of this form and all separate attachments to: Executive.Director@puc.nh.gov | | |

State of New Hampshire

Department of State

CERTIFICATE OF AUTHORITY OF **COLONIAL POWER GROUP, INC.**

The Secretary of State of the State of New Hampshire hereby certifies that an Application of **COLONIAL POWER GROUP, INC.** for a Certificate of Authority to transact business in this State, duly signed pursuant to the provisions of the New Hampshire Business Corporation Act, has been received in this office.

ACCORDINGLY the undersigned, by virtue of the authority vested in him by law, hereby issues this Certificate of Authority to **COLONIAL POWER GROUP, INC.** to transact business in this State under the name of **COLONIAL POWER GROUP, INC.**, and attaches hereto a copy of the Application for such Certificate.

Business ID: **869727**



IN TESTIMONY WHEREOF,
I hereto set my hand and cause to be affixed
the Seal of the State of New Hampshire,
this 26th day of April 2021 A.D.

A handwritten signature in black ink, appearing to read "William M. Gardner".

William M. Gardner
Secretary of State

State of New Hampshire

Department of State

CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that COLONIAL POWER GROUP, INC. is a Massachusetts Profit Corporation registered to transact business in New Hampshire on April 26, 2021. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: **869727**

Certificate Number : **0005357887**



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed
the Seal of the State of New Hampshire,
this **26th** day of **April** A.D. **2021**.

A handwritten signature in cursive script, reading "William M. Gardner".

William M. Gardner
Secretary of State



Electric Aggregator Assessment Exemption Claim Form

Pursuant to N.H. RSA 363-A:5, your company may be eligible for an exemption from assessment.

RSA 363-A:5: *Any public utility or other assessed entity that is not an entity to which RSA 363-A:2, I(c) or (d) applies, and that earned less than \$10,000 in gross revenue during the preceding fiscal year shall not be liable for any assessment pursuant to this chapter.*

If you are entitled to the exemption please complete, sign, and email this form to exemptions@puc.nh.gov

Please use one form per registration. For example, if your company is registered as both an electric aggregator and as a natural gas aggregator, file a separate form for each registration type.

| | |
|---|----------------------------------|
| Company name: Colonial Power Group, Inc. | |
| Registration type: <i>Electric Aggregator</i> | |
| Enter docket number (e.g., DM 19-001) under which your company's most recent registration application was approved: | |
| Aggregators - List energy suppliers with which retail customers were placed during fiscal year ending June 30, 2020: | |
| Enter gross revenue earned in New Hampshire during the fiscal year ending June 30, 2020: \$0.00 | |
| Prepared by: Mark Cappadona | Date completed: 4/27/2021 |
| Email: mark@colonialpowergroup.com | Telephone: 508-485-5858 |

Signature

Mark Cappadona

(Please print signatory's name.)

By the signature above, the signatory swears and affirms that the information provided on this form is true and accurate. False statements will be referred for prosecution pursuant to Puc 202.08, in accordance with NH RSA 641:1 and NH RSA 641:2, and/or pursuant to NH RSA 641:3.