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**FORM**

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**Application Form for  
the Registration of  
Metering Service  
Providers in the  
IESO-Administered  
Market**

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**Issue 3.0**

This Application Form will enable *Metering Service Providers* to register with the *IESO* to operate in the Wholesale Electricity Market.

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|                         |                                  |
|-------------------------|----------------------------------|
| <b>Document ID</b>      | MSP_TPL_0001                     |
| <b>Document Name</b>    | MSP Application Form             |
| <b>Issue</b>            | Issue 3.0                        |
| <b>Reason for Issue</b> | Issue Released for Baseline 13.1 |
| <b>Effective Date</b>   | June 1, 2005                     |

## Document Change History

| Issue | Reason for Issue  | Date         |
|-------|---|--------------|
| 1.0   | For publication   | 02/18/2000   |
| 2.0   | For <i>Metering Service Provider</i> Final Registration | 01/11/2002   |
| 3.0   | Issue Released for Baseline 13.1                        | June 1, 2005 |
|       |   |              |

## Related Documents

| Document ID  | Document Title  |
|--------------|---|
| MDP_PRO_0007 | Market Manual 3: Part 3.1: MSP Registration, Revocation and De-registration |
| IMO_AGR_0012 | Metering Service Provider Agreement   |
| MDP_RUL_0002 | Ontario Market Rules transmitted to the <i>IESO</i>                         |
|              |   |
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# Table of Changes

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| <b>Reference<br/>(Paragraph and<br/>Section)</b> | <b>Description of Change</b>  |
|--|---|
| Throughout                                       | Name and logo changed to <i>IESO</i> .  |
| Section 6  | Metering Technical Group changed to Wholesale Metering and <a href="mailto:meter.group@theIMO.com">meter.group@theIMO.com</a> changed to help.centre@ieso.ca. |
| Section C, #10                                   | Appendix 6.6 changed to Appendix 6.1.   |
| Throughout                                       | Changed classification rating from Public to Confidential.  |

**Registration Number:** \_\_\_\_\_ (to be supplied by the *IESO*)

## 1. Purpose of this Form

The purpose of this form is to obtain information to enable the Independent Electricity System Operator (“*IESO*”) to determine if the applicant is eligible for registration as a *metering service provider (MSP)* under Chapter 6 of the *Ontario Electricity Market Rules* (the “*Market Rules*”). Registration as an *MSP* carries with it authorization to undertake the registration, provision, installation, commissioning, maintenance, repair, replacement, inspection and testing of wholesale *metering installations* in the *IESO-administered market* in accordance with the *Market Rules*.

## 2. Structure of the Form

This Application Form for registration as a *metering service provider* contains the following four sections:

- a. General Information about the Applicant;
- b. Information about the Applicant’s Organization;
- c. Information Demonstrating the Applicant’s Qualifications; and
- d. Declaration and Undertaking.

Each section must be completed and, where applicable, signed by the Applicant.

## 3. Fees

The registration fee is presently waived.

A fee to contribute towards the cost of providing familiarization courses in the *IESO* procedures and standards applicable to *metering service providers* is payable in advance of attending these courses. Notification of the date of the course will indicate the fee payable which must be paid before any registration for attendance at the course will be accepted.

## 4. Important Information

Where the *IESO* determines it necessary or appropriate, it may request that the Applicant provide further information or clarification in support of its application for registration. Failure by the Applicant to respond to such request within the time specified in section 5.1.5 of Chapter 6 of the *Market Rules* will result in the Applicant being deemed to have withdrawn its application for registration.

The Applicant is required to sign the *Metering Service Provider Agreement* and to return a signed original with this Application Form. The *IESO* will not process an application for registration unless it is accompanied by a signed original of such executed *Agreement*. The *IESO* will sign the *Agreement* upon registration of the Applicant as a *metering service provider*.

Where the Applicant is a business organization, the *IESO* will, if the applicant is determined eligible for registration, register the business organization and not any one individual member of the organization as the *metering service provider*.

## 5. Information on the Web

The following URLs provide access to information available on the web, which is referred to in this Application Form and the *Metering Service Provider Agreement*.

Chapter 6 and Appendices

[http://www.ieso.ca/imoweb/pubs/marketRules/mr\\_chapter6.pdf](http://www.ieso.ca/imoweb/pubs/marketRules/mr_chapter6.pdf)

[http://www.ieso.ca/imoweb/pubs/marketRules/mr\\_chapter6appx.pdf](http://www.ieso.ca/imoweb/pubs/marketRules/mr_chapter6appx.pdf)

Technical Publications for Metering

<http://www.ieso.ca/imoweb/manuals/marketdocs.asp>

Measurement Canada

[http://strategis.ic.gc.ca/sc\\_mrksv/meascan/engdoc/8.html](http://strategis.ic.gc.ca/sc_mrksv/meascan/engdoc/8.html)

*Electricity & Gas Inspection Act*

[http://strategis.ic.gc.ca/SSI/lm/egiact\\_e.pdf](http://strategis.ic.gc.ca/SSI/lm/egiact_e.pdf)

*Electricity Act, 1998*

[http://192.75.156.68/DBLaws/Statutes/English/98e15\\_e.doc](http://192.75.156.68/DBLaws/Statutes/English/98e15_e.doc)

## 6. Completion Instructions

Please return the printed version of this form, the *Metering Service Provider Agreement*, both duly completed and signed, and the documentation in support of your application. If you are mailing all of the documentation please send it to:

Independent Electricity System Operator,  
Attn: Wholesale Metering,  
Station A, Box 4474,  
Toronto, ON M5W 4E5

If you are sending the information by courier please address it to:

Independent Electricity System Operator,  
Attn: Wholesale Metering,  
655 Bay Street,  
Toronto, ON M5G 2K4

If there are any queries regarding this Application Form, the supporting documentation or the *Metering Service Provider Agreement*, please contact the *IESO* Help Centre number (905) 403-6900 (1-888-448-7777) or at e mail: [help.centre@ieso.ca](mailto:help.centre@ieso.ca).

## 7. Form

### A. General Information

#### 1. Name

Name of Organization to be Registered: \_\_\_\_\_

Short Name: \_\_\_\_\_ (up to 12 characters)

#### 2. Business Address

Address (if RR, give Lot, Concession No. and Township):  
\_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Country: \_\_\_\_\_ Postal/Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

#### 3. Primary Contact for this Application

Mr. Mrs. Last Name: \_\_\_\_\_ Full First Name: \_\_\_\_\_ Initial: \_\_\_\_\_  
Miss. Ms. \_\_\_\_\_

Position Held: \_\_\_\_\_

Other: \_\_\_\_\_

Contact Address (if RR, give Lot, Concession No. and Township) if different from the address noted in Item 2 above:  
\_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Country: \_\_\_\_\_ Postal/Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Cellular Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Assistant's Name: \_\_\_\_\_

**4. Head of Business Organization**

(Chief Executive Officer, President or other person that has authority over and responsibility for the operations of the organization.)

Mr. Mrs. Last Name: \_\_\_\_\_ Full First Name: \_\_\_\_\_ Initial: \_\_\_\_\_

Miss. Ms. \_\_\_\_\_

Position Held: \_\_\_\_\_

Other: \_\_\_\_\_

Contact Address (if RR, give Lot, Concession No. and Township) if different from the address noted in Item 2 above:

\_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Country: \_\_\_\_\_ Postal/Zip Code: \_\_\_\_\_

\_\_\_\_\_

Phone Number: \_\_\_\_\_ Cellular Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

\_\_\_\_\_

E-mail Address: \_\_\_\_\_

\_\_\_\_\_

**5. Person Responsible for Invoicing and Funds Transfer**

Mr. Mrs. Last Name: \_\_\_\_\_ Full First Name: \_\_\_\_\_ Initial: \_\_\_\_\_

Miss. Ms. \_\_\_\_\_

Position Held: \_\_\_\_\_

Other: \_\_\_\_\_

Contact Address (if RR, give Lot, Concession No. and Township) if different from the address noted in Item 2 above:

\_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Country: \_\_\_\_\_ Postal/Zip Code: \_\_\_\_\_

\_\_\_\_\_

Phone Number: \_\_\_\_\_ Cellular Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

\_\_\_\_\_

E-mail Address: \_\_\_\_\_

\_\_\_\_\_

Assistant's Name: \_\_\_\_\_

\_\_\_\_\_

## B. Information About the Applicant's Organization

### 1. Nature and Details of Form of Applicant's Business Organization

Form (i.e., corporation, partnership, etc.): \_\_\_\_\_

Date of Formation: \_\_\_\_\_

Jurisdiction of Formation: \_\_\_\_\_

Registered office address if different from the address noted in Item 2 of Part A above:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2. Number of Qualified Meter Installers: \_\_\_\_\_

### 3. Does Your Organization Carry Out Any of the Following Activities or Functions?

- |  |                              |                             |
|--|------------------------------|-----------------------------|
| a) Generation of electricity   | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| b) Transmission of electricity   | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| c) Distribution of electricity   | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| d) Accredited meter verifier under the <i>Electricity and Gas Inspection Act</i> | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| e) Provision of metering-related services in the retail market                   | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

### 4. Does Your Organization Plan to Carry Out Any of the Following Activities or Functions?

- |  |                              |                             |
|--|------------------------------|-----------------------------|
| a) Accredited meter verifier under the <i>Electricity and Gas Inspection Act</i> | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| b) <i>Metering service provider</i> for an organization other than your own      | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| c) Provision of metering-related services in the retail market                   | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| d) Generation of electricity   | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| e) Transmission of electricity   | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| f) Distribution of electricity   | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

**5. Is or Will Your Organization be a *Metered Market Participant*:**      Yes       No

**6. Comments:**

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### C. Information Demonstrating Applicant's Qualifications

It is the responsibility of the Applicant to demonstrate to the *IESO* that the Applicant has all of the qualifications required by the *Market Rules* to be met by *metering service providers*.

Please answer each of the following questions and attach to this application for registration copies of all documentation submitted in support of your responses.

- 1 Does the Applicant have an adequate number of personnel having the qualifications described in sections 3 to 8 below to permit the Applicant to perform all of the functions and obligations of a *metering service provider* under Chapter 6 of the "Market Rules" and under any policies published to date by the *IESO* pursuant to that Chapter?  
Yes  / No
- 2 Does the Applicant have an adequate number of personnel having the qualifications referred to in sections 3 to 8 below to enable the Applicant to meet the performance standards set forth in section 1.3.1 of Appendix 6.1 of Chapter 6 of the "Market Rules"?  
Yes  / No
- 3 Does the Applicant have personnel who have successfully completed a metering training program relating to *metering installations* provided by an entity recognized by the *IESO* for such purpose, including but not limited to the Municipal Electrical Association, the former Ontario Hydro and the corporations referred to in sections 48(2) of the "Electricity Act, 1998"?  
Yes  / No
- 4 Does the Applicant have personnel who have recent training in procedures pertaining to the provision, installation, commissioning, repair, maintenance, replacement, inspection and testing of *metering installations*, in the preparation of metering-related documentation, in the calculation of site specific loss adjustments and measurement error correction factors and in the resolution of trouble calls?  
Yes  / No
- 5 Does the Applicant have personnel who have successfully completed electrical safety training provided by an entity recognized by the *IESO* for such purpose, including but not limited to the Electrical Utility Safety Authority, the former Ontario Hydro and the corporations referred to in subsection 48(2) of the "Electricity Act, 1998"?  
Yes  / No
- 6 Does the Applicant have personnel with demonstrated experience in all of the requirements relating to metering imposed by or under federal law (such as the *Electricity and Gas Inspection Act*)?  
Yes  / No
- 7 Does the Applicant have personnel with demonstrated experience in the investigation and reporting of incidences of tampering with *metering installations* and *metering data*?  
Yes  / No

- 8 Does the Applicant have personnel with demonstrated experience in procedures for maintaining the security, validity and integrity of *metering data*, including the collection of static and dynamic *metering data* and the reading of *metering data* prior to and after the repair or replacement of *metering installations*?  
Yes  / No
- 9 Does the Applicant have the necessary equipment, materials, systems and procedures to enable it to perform all of the functions and obligations of a *metering service provider* under Chapter 6 of the "Market Rules" and under any policies published to date by the *IESO* pursuant to that Chapter?  
Yes  / No
- 10 Does the Applicant have the necessary equipment, materials, systems and procedures to enable it to meet the performance standards set forth in section 1.3.1 of Appendix 6.1 of Chapter 6 of the "Market Rules"?  
Yes  / No
- 11 Does the Applicant hold all *licences*, permits and other authorizations required by applicable law in order to enable it to lawfully carry on of the business of a *metering service provider*? Are all such *licences*, permits and other authorizations valid and in good standing?  
Yes  / No
- 12 Does the Applicant hold valid ISO 9001 certification for all of the functions and obligations of a *metering service provider* under Chapter 6 of the "Market Rules" and under any policies published to date by the *IESO* pursuant to that Chapter?  
Yes  / No

**D. Declaration and Undertaking**

**The undersigned, a duly authorized representative of [insert text], an Applicant for registration as a metering service provider, hereby declares and undertakes as follows:**

- 1 that the information contained in and submitted in support of this application for registration as a *metering service provider* is true, complete and accurate to the best of the undersigned's knowledge, information and belief, after due inquiry;
- 2 that, in the absence of ISO 9001 certification, the Applicant consents to the conduct by the *IESO* of pre-registration systems and procedures tests and audits and undertakes to provide the *IESO* and the *IESO's* auditors with unrestricted access to its facilities, equipment, records and personnel for the purpose of such tests and audits;
- 3 that the Applicant undertakes that, in the event that it may wish to dispute any decision by the *IESO* to deny this application for registration, it will submit the matter for resolution by the *IESO's* dispute resolution panel pursuant to Section 2 of Chapter 3 of the "Market Rules" and that it will not commence a civil or other proceeding in relation to such a dispute until such time as the dispute resolution process described in Section 2 of Chapter 3 has been completed; and
- 4 that the Applicant has read and understood the *Metering Service Provider Agreement*.

DATED at [City], [Province/State] this [date].

Signature: \_\_\_\_\_

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

Title: \_\_\_\_\_

**– End of Document –**