

This page sets out the instructions for completing the Prescribed Form – Notice of Change.

All capitalized terms used in these instructions and the Prescribed Form – Notice of Change, unless otherwise stated, have the meanings ascribed to them in the LT1 RFP.

INSTRUCTIONS APPLICABLE TO ALL PRESCRIBED FORMS:

- a. The first page of a Prescribed Form should be marked with the name of the Long-Term Reliability Project that is the subject of the Proposal. The Proponent should use the name given to the Long-Term Reliability Project in the Prescribed Form – Proponent Information, Declarations and Workbook.
- b. This instruction page is not required to be submitted as part of the completed Prescribed Form.
- c. The Prescribed Form is required to be submitted electronically via email to the IESO at LT.RFP@ieso.ca.
- d. Information provided in each Prescribed Form should be consistent with the information provided in the Proposal.
- e. Where the Prescribed Form has multiple pages, the pages of the Prescribed Form should be kept together in the Proposal in sequential order.
- f. Where a blank field for a section/page reference is provided in a Prescribed Form, enter the section/page reference of the Proposal where the substantiating evidence for that particular item can be found.
- g. Apart from the completion of any blanks, drop down lists, check boxes or similar uncompleted information in a Prescribed Form, no amendments may be made to the wording of a Prescribed Form.
- h. Each Prescribed Form must be completed in its entirety. Fields marked <if applicable> must be completed if applicable to the Proposal. If not applicable, they should be marked " Not Applicable".
- i. If a signature is required for a Prescribed Form, the Prescribed Form must be signed by a person with authority to bind the Proponent. The Prescribed Form may be printed, signed and scanned, or may be signed digitally through Adobe (Digital ID, or Fill and Sign), Apple Preview or DocuSign.
- j. With the exception of this instruction page, instructions within a Prescribed Form will be enclosed in brackets.

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Section 1 – Information of the Proponent and the Long-Term Reliability Project

Unique Project ID of the Long-Term Reliability Project: *<Enter Unique Project ID>*

Name of the Long-Term Reliability Project: *<Enter name of the Long-Term Reliability Project>*

Legal name of the Proponent: *<Enter legal name of the Proponent>*

Section 2 – Notice of Change pursuant to Section 2.1(b)(i) of the LT1 RFP

Prior to the submission of the Proponent's Proposal under the LT1 RFP, the following aspects relating to the Proponent's Qualification Submission (or that of the Proponent's Control Group Member) have changed:

The information submitted in respect of the Designated Team Members of the Qualified Applicant under the LT1 RFQ are no longer true or accurate.

The Control Group Member(s) of the Qualified Applicant in respect of which the Qualified Applicant met the applicable Entity Development Experience Threshold under the LT1 RFQ have changed.

If the information submitted in respect of the Designated Team Members of the Qualified Applicant under the LT1 RFQ is no longer true or accurate:

The Proponent has submitted in Exhibit A of this Prescribed Form:

(i) a description of the information in respect of the Designated Team Members of the Qualified Applicant under the LT1 RFQ that is no longer true or accurate; and

(ii) replacement information which is true and accurate as of the Proposal Submission Deadline, together with supporting evidence required, if any, demonstrating that the Qualified Applicant that is the prospective Proponent or that Controls the prospective Proponent, satisfies the Team Member Mandatory Requirements pursuant to the LT1 RFQ as of the Proposal Submission Deadline.

If the Control Group Member(s) of the Qualified Applicant in respect of which the Qualified Applicant met the applicable Entity Development Experience Threshold evaluated under the LT1 RFQ have changed:

The Proponent has submitted in Exhibit A of this Prescribed Form:

(i) a description of the Control Group Member(s) of the Qualified Applicant in respect of which the Qualified Applicant met the applicable Entity Development Experience Threshold evaluated under the LT1 RFQ that has changed; and

(ii) replacement information which is true and accurate as of the Proposal Submission Deadline, together with supporting evidence required, if any, demonstrating that the Qualified Applicant that is the prospective Proponent or that Controls the prospective Proponent, satisfies the applicable Entity Development Experience Threshold for which it qualified under the LT1 RFQ.

The Proponent has submitted:

A statutory declaration of an officer of the Proponent in the form set out in Exhibit B to this Prescribed Form.

I hereby confirm that I am an individual with the authority to bind the Proponent and that, if applicable, by signing this form using electronic signature, I agree to the content, terms and conditions set out in the document on behalf of the Proponent.

PROPONENT NAME: _____

Per: _____

Print Name:

Print Title:

Date Signed:

EXHIBIT A
UPDATED INFORMATION AND EVIDENCE

Note: Provide description of: (i) the information in respect of the Designated Team Members of the Qualified Applicant under the LT1 RFQ that is no longer true or accurate; or (ii) the Control Group Member(s) of the Qualified Applicant in respect of which the Qualified Applicant met the applicable Entity Development Experience Threshold under the LT1 RFQ that has changed, as applicable. Attach the updated information along with supporting evidence.

EXHIBIT B STATUTORY DECLARATION

STATUTORY DECLARATION IN THE MATTER OF the Proposal for <insert name of the Proponent> (the “**Proponent**”), under the IESO’s LT1 RFP.

Capitalized terms not defined herein have the meanings ascribed to them in the LT1 RFP.

I, <insert name of declarant>, of the <insert City/Town/Region etc.> of <insert name of City/Town/Region etc.>, in <insert name of Province or State> DO SOLEMNLY DECLARE, on behalf of the Proponent, without personal liability, the following information:

1. I am the / an <insert office held, e.g. president, director, etc.> of the Proponent and have knowledge of the matters herein described.
2. The information and documents appended as Exhibit A to the Prescribed Form – Notice of Change are accurate and complete in all material respects.

AND I MAKE THIS SOLEMN DECLARATION conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and by virtue of the *Canada Evidence Act*.

Name of Declarant <u><insert name of declarant></u>	Declared before me at <u><insert City, Town, Region, etc.></u> of <u><insert name of City, Town, Region, etc.></u> in the [Province/State] of <u><insert name of [Province>/State]</u> this <u> </u> day of <u> </u> , 20 <u> </u>
Signature of Declarant	Name of Commissioner of Oaths, etc. <u><insert name of Commissioner of Oaths, etc.></u>
<u><Statutory declarations must be solemnly declared and signed before commissioners of oaths or similar officials (e.g. notary public).></u>	Signature of Commissioner of Oaths, etc.