This page sets out the instructions for completing the **Prescribed Form – Contract Representative**.

All capitalized terms used in these instructions and the Prescribed Form – Contract Representative, unless otherwise stated, have the meanings ascribed to them in the REP Round 2 Contract.

**INSTRUCTIONS APPLICABLE TO ALL PRESCRIBED FORMS:**

1. This instruction page is not required to be submitted with the Prescribed Form.
2. Where the Prescribed Form has multiple pages, the pages of the Prescribed Form should be kept together in sequential order.
3. Apart from the completion of any blanks, drop down lists, check boxes or similar incomplete information in a Prescribed Form, no amendments may be made to the wording of a Prescribed Form.
4. Each Prescribed Form must be completed in its entirety. Fields marked “if applicable” must be completed if applicable to the Project. If not applicable, they should be marked "not applicable".
5. If the signature of the Generator is required for a Prescribed Form, the Prescribed Form must be signed by the Contract Representative appointed in accordance with Section 18.8 of the REP Round 2 Contract, unless specified otherwise.
6. With the exception of this instruction page, instructions within a Prescribed Form will be enclosed in square brackets.

**PRESCRIBED FORM – CONTRACT REPRESENTATIVE**

**SUBMIT BY EMAIL (PDF WITH SIGNATURE) TO** **COMMERCIAL.REP@AESO.CA**

Capitalized terms not defined herein have the meaning ascribed thereto in the REP Round 2 Contract, which has been executed in respect of the project referenced below (the “**Agreement**”).

The Generator is hereby submitting this completed Prescribed Form - Contract Representative to the AESO, pursuant to Section 18.8 of the Agreement.

|  |
| --- |
| **ADDING OR REPLACING THE CONTRACT REPRESENTATIVE** |
| [ ]  | The Authorized Signatory below is either a signatory of the Agreement, a person authorized to receive Notices, or the existing Contract Representative. No other forms are required. |
| [ ]  | The Authorized Signatory below is neither a signatory of the Agreement, a person authorized to receive Notices, nor the existing Contract Representative. A Certificate of Incumbency, in the form of Schedule A, must be submitted with this Prescribed Form. |

|  |  |
| --- | --- |
| **Date** | 2019/01/01 |
| **Legal Name of Generator** | [insert legal name of Generator] |
| **Name of Project** | [insert Name of Project] |
| **Target COD** | 2022/06/30 |
| **Agreement Date** | 2018/12/05 |

|  |
| --- |
| **ADD CONTRACT REPRESENTATIVE** |
| The current Contract Representative will be removed when a new the new Contract Representative is appointed. |
| Name of Contract Representative | [insert name of new Contract Representative] |
| Title | [insert title of new Contract Representative] |
| Mailing AddressIncluding Postal Code | [insert address of new Contract Representative] |
| Telephone [ ]  Direct Line | (     )       |
| Fax [ ]  Direct Line | (     )       |
| E-mail Address | [insert email address of new Contract Representative] |

|  |
| --- |
| **AUTHORIZED SIGNATORY**If the Authorized Signatory is neither a signatory of the Agreement, a person authorized to receive Notices, nor the Contract Representative, then a Certificate of Incumbency, in the form of Schedule A, must be submitted with this form. |
|  |  |  |
|  |  |  |  |  |  |
| By:  |  |  | Date: | 2019/01/01 |  |
|  | [Name] |  |  |  |  |
|  | [Title] |  |  |  |  |
|  | [legal name of Generator or Generator's General Partner, as applicable] |  |  |  |  |
|  |  |  |  |  |  |

 *[Signature page to Prescribed Form – Contract Representative]*

**SCHEDULE A**

**Certificate of Incumbency**

I, the undersigned, do hereby certify for and on behalf of the Generator, in my capacity as an officer or director of the General Partner of the Generator, and not in my personal capacity, that the following person is a duly appointed director or officer of [insert legal name of the General Partner of the Generator], holding the respective office set opposite their name and that the signature set forth opposite their name is their genuine signature:

|  |  |  |
| --- | --- | --- |
| **Name** | **Office** | **Signature** |
|       |       |  |

And [Name of Individual Above] has the authority to execute on behalf of the Generator the Prescribed Form – Contract Representative.

DATED this [day] day of [month], [year]

|  |  |  |
| --- | --- | --- |
|  |  |  |
|  |  | Name: [Name] |
|  |  | Title: [Title] |

*[Schedule A to Prescribed Form – Contract Representative]*