

COMMERCIAL ACCOUNT REGISTRATION (GREATER THAN 50kW)

Please complete and return SIGNED REGISTRATION within 10 business days



Date Received: _____ Rep's Initials: _____

ACCOUNT NUMBER _____

Part 1 – Account Information

Owner Tenant

Effective Date: _____
Day / month / year

Service Address: _____

Business Name: _____

Registration #: _____

Corporate Name: _____

Ontario Corporation #: _____

Nature of Business: _____

Previous Address: _____

Mailing Address (if different from service address) _____

Contact Information:

BUSINESS OWNER 1

Mr. Ms. Mrs. Miss _____

Position: _____

Business Phone: _____

Email: _____

BUSINESS OWNER 2

Mr. Ms. Mrs. Miss _____

Position: _____

Business Phone: _____

Email: _____

Fax Number: _____ Website: _____

Accounts Payable Contact: _____ Phone: _____

To be filled in when owner is a sole proprietor:

Owner 1

Drivers Licence: _____

Social Insurance Number: _____

Date of Birth: _____
Day / month / year

Owner 2

Drivers Licence: _____

Social Insurance Number: _____

Date of Birth: _____
Day / month / year

All person's on title of listed on a lease **must** be included on this registration form requesting service. Please make this form is complete to assure your account is processed in a timely manner.

Personal Information is collected for the purpose of billing and providing you with on-going electricity service. Your personal information is not used in any way for marketing or shared with any other agencies or businesses. Protecting your privacy and the confidentiality of your Personal Information is a fundamental aspect to the way Hydro One Brampton does business. For more information you may contact our Customer Accounts Department or to view Hydro One Brampton's Privacy Code or Conditions of Service you may visit our website at www.hydroonebrampton.com.

Hydro One Brampton, 175 Sandalwood Parkway West, Brampton, Ontario, L7A 1E8
Customer Accounts (905) 840-6300 Ext.7300 Fax: (905) 452-5537 cservice@hydroonebrampton.com

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Please complete and return SIGNED REGISTRATION within 10 business days



To be completed by owners:

Lawyers Name: _____ Phone: _____

To be completed by tenants: Lease No Yes Date: _____ / _____
From To
day / month / year day / month / year

Owners Name: _____ Phone: _____

Address: _____

Part 2 – Payment Plan Options

I/We would like to enroll in the Pre-Authorized Debit.



If choosing the Pre-Authorized Debit, please complete the PAD Agreement and enclose a void cheque to return with this registration form. Pre-Authorized Debits are deducted from your bank account upon the due date of your bill.

Part 3 – Security Arrangements

Hydro One Brampton requires the payment of a security deposit from all customers who have not demonstrated a good payment history. **Your security deposit will be on your first bill.** To be exempt from providing Hydro One Brampton with a security deposit we require one of the following:

Note: Any exemption provided MUST BE IN THE SAME BUSINESS/CORPORATE NAME listed on this registration AND MUST SHOW 5 YEARS good payment history; some of which must have occurred in the previous 24 months.

_____ Good payment history from a previous account with Hydro One Brampton. Provide your previous account number _____ and service address _____.

_____ Reference Letter from another electricity or natural gas utility in Canada. (Please enclose reference letter and return with this registration .)

_____ Equifax Credit Report showing good payment history. (report must be returned with this registration form) Equifax 1-800-465-7166 www.equifax.ca

_____ Credit Rating Report from a recognized credit rating agency using Standard and Poor's terminology. (report must be returned with this registration)

Part 4 – Acknowledgement

I/We agree to accept Distribution Services from Hydro One Brampton Networks Inc. in accordance with their Conditions of Service and be bound by them as they exist and they may be amended from time to time. Hydro One Brampton's Conditions of Service may be viewed on our website at www.hydroonebrampton.com.

Date: _____
Day / month / year

Owner 1 Signature: _____ Owner 2 Signature: _____

Be sure to attach all the required information with this registration form and return to our office within 10 business days of receipt using the enclosed envelope.

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