

# RECURRENT ENERGY

**The Ministry of the Environment,  
Director, Environmental Assessment and Approvals Branch,  
2 St. Clair Avenue West, Floor 12A  
Toronto, Ontario, M4V 1L5**

March 16, 2011

Re: Renewable Energy Approval ("REA") Application for RE Waubaushene 5 Solar Project

## COVER LETTER

Dear Ministry of the Environment,

Please find attached the completed REA application for RE Waubaushene 5 ULC. Note that all material has been prepared and provided in accordance with the REA requirements and a copy of the REA Application has also been sent to the Barrie District MOE Office.

If you have any questions or comments, my contact information is below.

Yours very truly



David Brochu  
Vice President  
[David.brochu@recurrentenergy.com](mailto:David.brochu@recurrentenergy.com)  
630-333-7602

**General Information and Instructions**

**General**

Information requested in this form is collected under the authority of the *Environmental Protection Act*, R.S.O. 1990 (EPA) and will be used to evaluate this application for a Renewable Energy Project. Questions about this collection of information should be directed to: Information Unit Supervisor, Environmental Assessment and Approvals Branch, 2 St. Clair Ave. W, Floor 12A, Toronto ON M4V 1L5. Telephone outside Toronto 1-800-461-6290 or in Toronto 416-314-8001.

**Instructions**

1. **Applicants are responsible for ensuring that they complete the most recent application form.** Application forms and supporting documentation are available from the Environmental Assessment and Approvals Branch toll free at 1-800-461-6290 (locally at 416-314-8001), from your local District Office of the Ministry of the Environment, and in the "Publications" section of the Ministry of the Environment website at [www.ene.gov.on.ca](http://www.ene.gov.on.ca).
2. Questions regarding completion and submission of this application should be directed to the Environmental Assessment and Approvals Branch, 2 St. Clair Avenue West, Floor 12A, Toronto, Ontario, M4V 1L5, telephone number 1-800-461-6290 or (416) 314-8001, or to your local District Office of the Ministry of the Environment.
3. **Complete Submission**  
In order to be eligible for the issue of a renewable energy approval, a person who proposes to engage in a renewable energy project shall, before submitting an application to the Director,
  - 1) prepare the application in a form or format approved by the Director;
  - 2) obtain or prepare, as the case may be, any documents that,
    - a) are required under Part IV to be submitted as part of the application, or
    - b) are to be submitted as part of the application for the purposes of obtaining an exemption from a provision of Part V; and
    - c) comply with all other requirements of Part IV of Ontario Regulation 359/09.
  - 3) If there is more than one person applying for the issue of a renewable energy approval in respect of a renewable energy project, those persons shall jointly submit one application for the issue of a renewable energy approval.
  - 4) An application to alter the terms and conditions of a renewable energy approval shall be prepared in a form or format approved by the Director and shall be submitted to the Director.

**Supporting documents**

- 1) A person who proposes to engage in a renewable energy project shall submit a document set out in Column 1 of Table 1 of the Regulation as part of an application for the issue of a renewable energy approval in respect of the project if it is a project described opposite the document in Column 3.
- 2) If a document set out in Column 1 of Table 1 of the Regulation is submitted as part of an application for the issue of a renewable energy approval, the person who is engaging in the renewable energy project shall ensure that the document meets the requirements set out opposite the document in Column 2 of Table 1 of the Regulation.
- 3) Any document submitted as part of an application for the issue of a renewable energy approval shall be in writing.
- 4) Any document submitted as part of an application for the issue of a renewable energy approval that is a diagram, map or plan shall be drawn to scale and shall include a scale bar and a north arrow.

**INCOMPLETE APPLICATIONS WILL BE RETURNED TO THE APPLICANT.**

The Ministry may require additional information during the technical review of any application.

4. If you are submitting your application electronically, electronic PDF application form should be completed and submitted by email to [REAESubmission@ontario.ca](mailto:REAESubmission@ontario.ca). Once the application has been received, you will receive an acknowledgement email with an MOE reference number for your application and additional instructions for submitting your hard copy application package and supporting information.

If you are not submitting your application electronically, the original application form and all required supporting documents must be sent to:

**The Ministry of the Environment,  
Director, Environmental Assessment and Approvals Branch,  
2 St. Clair Avenue West, Floor 12A, Toronto, Ontario, M4V 1L5**

A copy of the complete application must be sent to any local Ministry District Office having jurisdiction over the project location. To locate the appropriate local Ministry District Office, please visit the Ministry of the Environment Internet site at:  
[www.ene.gov.on.ca/envision/org/op.htm#Reg/Dist](http://www.ene.gov.on.ca/envision/org/op.htm#Reg/Dist)

A cover letter addressed to the Director of Environmental Assessment and Approvals Branch should accompany both submissions and indicate that a copy of the complete submission has been sent to each District Office that has jurisdiction over the project location.

5. Information collected by the Ministry of the Environment is subject to the *Freedom of Information and Protection of Privacy Act* (FOIPPA). If you are of the view that any part of your application is confidential on the grounds such information constitutes a trade secret or scientific, technical, commercial, financial or labour relations information, please make this known now. Otherwise, the Ministry may make the information available to the public without further notice to you.

For Office Use Only		
Reference Number	Date (y/m/d)	Initials

Form ID: 1056634

### Application Summary

Project Name *(Project identifier to be used as a reference in correspondence)*  
RE Waubashene 5 Solar Project

Project Description Summary  
*(This summary should reflect the description in the documents upon which consultation has been completed and if it does not, the difference should be highlighted)*

The proposed facility is a 5 MW solar generating facility, located 7 km northeast of Coldwater in the Township of Severn. The project will generate electricity using photovoltaic panels mounted on fixed racking structures, with in-ground foundations. Direct current generated by the panels is converted to alternating current by inverters and stepped up to intermediate voltages by a transformer. Alternating current is routed to a main facility substation where it is stepped up to distribution line voltage. A short distribution line is used to connect the facility into the existing distribution grid. Other project components include access roads, a control building and site fencing.

Required Information	Completed (yes or no)
<input checked="" type="checkbox"/> Project Name & Description	Yes
<input checked="" type="checkbox"/> Section 1: Applicant Information	Yes
<input checked="" type="checkbox"/> Section 2: Project Information	Yes
<input checked="" type="checkbox"/> Section 3: Site Information	Yes
<input checked="" type="checkbox"/> Section 4: Required Documents	Yes

Application Status: FORM COMPLETE.

**Summary:**

Type of Application New Application	Type of Renewable Energy Generation Facility Solar Photo Voltaic Class 3.
Total Maximum Name Plate Capacity 5 MW	
Total Expected Generation Capacity 5 MW	

# Section 1: Applicant Information

**1.1 Applicant Information** (Owner of works/facility)

Applicant Name (legal name of individual or organization as evidenced by legal documents) RE Waubaushene 5 ULC		Business Identification Number 1809979
Business Name (the name under which the entity is operating or trading - also referred to as trade name) RE Waubaushene 5 ULC		<input checked="" type="checkbox"/> same as Applicant Name
Applicant Type: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor	<input type="checkbox"/> Federal Government <input type="checkbox"/> Municipal Government <input type="checkbox"/> Provincial Government <input type="checkbox"/> Other (describe):	North American Industry Classification System (NAICS) Code 221119 Other Electric Power Generation
Business Activity Description (a description of the business endeavour, this may include products sold, services provided or machinery/equipment used, etc.) RE Waubaushene 5 ULC specializes in the development and operation of solar generating facilities		


**1.2 Applicant Physical Address**

Civic Address- Street information (includes street number, name, type and direction) 1959 Upper Water Street		Unit Identifier (i.e. apartment number) Suite 900	
Survey Address (Not required if Street Information is provided)	Lot	Conc.	Part
Municipality /Unorganized Township Halifax	County/District	Province/State Nova scotia	Country Canada
Postal Code B3J 2X2	Telephone Number (include area code & ext.) (415)675-1512 ext.	Fax Number (include area code) (415)675-1501	Mobile Number (include area code) E-mail Address sheldon.kimber@recurrentenergy.com

**1.3 Applicant Mailing Address**

Same as Applicant Physical Address? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If no, please provide site address information below)	
Civic Address - Street information (civic numbering and street information including street number, name, type and direction) 300 California Street	
Unit Identifier (i.e. apartment number) 8th Floor	
Delivery Designator	Delivery Identifier
Municipality /Unorganized Township San Francisco	Province/State CA
Country USA	Postal Code 94101

**1.4 Statement of Applicant**

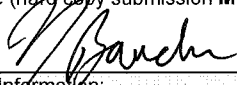
I, the undersigned hereby declare that, to the best of my knowledge:		
<ul style="list-style-type: none"> <li>The information contained herein is complete and accurate in every way and I am aware of the penalties against providing false information as per s.184(2) of the Environmental Protection Act.</li> <li>I understand that by submitting this form, I am guaranteeing the completeness and accuracy of all the information provided on this form and included in the draft reports. Failure to submit the correct information will result in an incomplete application being returned.</li> <li>The Project Technical Information Contact identified below is authorized to act on my behalf for the purpose of obtaining approval under section 47.3 of the EPA for the Project identified herein.</li> </ul>		
Name of Signing Authority (please print) Sheldon Kimber	Title SVP North America Development	
Telephone Number (including area code & extension) (415)675-1512 ext.	Fax Number (including area code) (415)675-1501	E-mail Address sheldon.kimber@recurrentenergy.com
Mobile Number (including area code)	Signature 	Date (y/m/d) 2011/03/14

## Section 2: Project Information

**2.1 Application Type**

Type of Application:			
<input checked="" type="checkbox"/> New Renewable Energy Approval		Where Applicable provide Existing Renewable Energy Approval Number:	
<input type="checkbox"/> Amendment to Renewable Energy Approval			
Application Initiated by:			
<input checked="" type="checkbox"/> Proponent		<input type="checkbox"/> Environmental Assessment and Approvals Branch	
<input type="checkbox"/> Provincial Officer Order (attach copy)		<input type="checkbox"/> Other (specify):	
Current Certificate(s) of Approval <i>(please attach a separate list if more space is required)</i>			
Certificate of Approval Number	Date of Issue (yyyy/mm/dd)	Certificate of Approval Number	Date of Issue (yyyy/mm/dd)
Certificate of Approval Number	Date of Issue (yyyy/mm/dd)	Certificate of Approval Number	Date of Issue (yyyy/mm/dd)
Current Permit(s) to Take Water <i>(please attach a separate list if more space is required)</i>			
Permit Number	Date of Issue (yyyy/mm/dd)	Permit Number	Date of Issue (yyyy/mm/dd)
Permit Number	Date of Issue (yyyy/mm/dd)	Permit Number	Date of Issue (yyyy/mm/dd)
Project Schedule			
Estimated date for start of construction/installation (yyyy/mm/dd)		Estimated date for start of operation (yyyy/mm/dd)	
2012/04/29		2012/11/29	

**2.2 Statement of Project Technical Information Contact**

Is the Project Technical Information Contact the same as the Applicant (identified in Section 1)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>I, the undersigned hereby declare that, to the best of my knowledge:</b> <ul style="list-style-type: none"> <li>The information contained herein and the information submitted in support of this application (electronically and in hard copy) is complete and accurate in every way and I am aware of the penalties against providing false information as per s.184(2) of the <i>Environmental Protection Act</i>.</li> <li>I understand that by submitting this form, I am guaranteeing the completeness and accuracy of this form and the draft documents. Failure to submit the correct information will result in the application being returned as incomplete.</li> <li>That the information contained in the electronically submitted application form is the same as the information submitted in the hard copy submission.</li> <li>I have used the most recent application form (as obtained from the "publications" section of the Ministry of the Environment website at <a href="http://www.ene.gov.on.ca">www.ene.gov.on.ca</a> or from the Environmental Assessment and Approvals Branch at 1-800-461-6290).</li> </ul>			
Name of Project Technical Information Contact		Company	
Noel Boucher		Hatch	
Telephone Number <i>(include area code &amp; ext.)</i>	Fax Number <i>(include area code)</i>	Mobile Number <i>(include area code)</i>	E-mail Address
(905)374-0701 ext. 5757	(905)374-1157		nboucher@hatch.ca
Signature <i>(hard copy submission MUST be signed)</i>		Date (yyyy/mm/dd)	
		2011/03/22	
Address Information:			
Same as Applicant Mailing Address? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(If no, please provide technical information contact address information below)</i>			
Civic Address - Street information <i>(civic numbering and street information including street number, name, type and direction)</i>			Unit Identifier <i>(i.e. apartment number)</i>
4342 Queen Street			Suite 500
Delivery Designator	Delivery Identifier	Postal Station	
Municipality /Unorganized Township	Province/State	Country	Postal Code
Niagara Falls	Ontario	Canada	L2E 7J7

**2.3 Other Approvals for Facility – Please attach a separate list if more space is required**

Separate list attached?  Yes  No

List all other environmental approvals/permits applied for related to this project or received in relation to this project

Approval Number	Approval Date (yyy/mm/dd)	Approval Number	Approval Date (yyy/mm/dd)	Approval Number	Approval Date (yyy/mm/dd)

Ontario Power Authority (OPA) Registration ID (if applicable)  
FIT-9764N

Ontario Power Authority (OPA) Reference Number (if applicable)  
FIT-FGAXLDD

**2.4 Type of Renewable Energy Generation Facility (select all that apply)**

Wind Facility	Biofuel / Biogas / Other	Anaerobic Digestion Facility	Thermal Treatment Facility	Solar Photo Voltaic Facility
<input type="checkbox"/> Class 2	<input type="checkbox"/> Biofuel	<input type="checkbox"/> Class 1	<input type="checkbox"/> Class 1	<input checked="" type="checkbox"/> Class 3
<input type="checkbox"/> Class 3	<input type="checkbox"/> Biogas	<input type="checkbox"/> Class 2	<input type="checkbox"/> Class 2	
<input type="checkbox"/> Class 4	<input type="checkbox"/> Other	<input type="checkbox"/> Class 3	<input type="checkbox"/> Class 3	
<input type="checkbox"/> Class 5	If other, please describe:			

**2.5 Generation of Electricity**

Total Maximum Name Plate Capacity	Total Expected Generation Capacity
5 MW (1 MW = 1000 kW / 1 kW = 0.001 MW)	5 MW (1 MW = 1000 kW / 1 kW = 0.001 MW)
Days and Hours of Operation	
365 d/yr, 7am-7 pm (Spring)	

### Section 3: Site Information

**3.1 Project Location - (the site/location where project will be located)**

Same as Applicant Physical Address? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If no, please provide site address information below)					
Civic Address- Street information (includes street number, name, type and direction)					Unit Identifier (i.e. apartment number)
1524 Taylor Line, Coldwater, Ontario					n/a
Survey Address <i>(Legal description of the site)</i>	Lot	Conc.	Part	Reference Plan	
	Lots 4 and 5	2	see below	see below	
Municipality / Unorganized Township		County/District		Postal Code	
Severn		Simcoe		L0K 1E0	
Non Address Information (where the project spans many locations or a large rural area, specify how the project area relates to the address provided)					
Complete legal description is as follows: PART OF LOTS 4 AND 5, CONCESSION 2, MATCHEDASH, AS IN INSTRUMENT NO. RO1119470 EXCEPT PARTS 3 AND 4 ON PLAN 51R- 21312 AND PARTS 1 AND 2 ON PLAN 51R-35192, SEVERN.					
Map Datum	Zone	Accuracy Estimate	Geo Referencing Method	UTM Easting	UTM Northing
NAD83	17	+/- 5 m	GIS mapping	610598	4958134

**3.2 Municipal or local authority Information - (List all municipal or board authorities where the project is located)**

Local Municipality / Unorganized Township (Include each Single Tier or Lower Tier in which the project location is situated. Attach a separate list if more space is necessary)					
Name of Municipality		Address		Phone	
Township of Severn		P.O. Box 159, 1024 Hurlwood Lane, Orillia, ON L3V 6J3		(705)325-2315      227	
Clerk's Name		Clerk's Phone/Fax		E-Mail Address	
Henry Sander		(705)327-5818		hsander@townshipofsevern.com	
Is the project location situated in one or more Upper Tier Municipality? (i.e., county, regional or district municipality.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
List all Upper Tier Municipalities that the project location is situated in. Attach a separate list if more space is necessary					
Name of Municipality		Address		Phone	
County of Simcoe		1110 Highway 26, Midhurst, ON L0L 1X0		(705)726-9300	
Clerk's Name		Clerk's Phone/Fax		E-Mail Address	
Glen Knox		(705)726-9832		glen.knox@simcoe.ca	
Is the project location situated in a Local Roads Area? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
List all Local Roads Areas that the project location is situated in. Attach a separate list if more space is necessary					
Name of local roads board		Address		Phone	
Secretary-treasurer's Name		Secretary-treasurer's Phone/Fax		E-Mail Address	
Is the project location in a Local Service Board area? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
List all Local Service Board areas the project location is situated in. Attach a separate list if more space is necessary					
Name of Local Service Board		Address		Phone	
Secretary's Name		Secretary's Phone/Fax		E-Mail Address	

**3.3 Site Information** - (information about the site/location where project will be located)

Site Name RE Waubaushene 5	MOE District Office Barrie District Office
Is in any portion of the Project location on federally owned land or a reserve? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Is in any portion of the Project location on Crown Land? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Is the Project location that is the subject of this application owned by the Applicant? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>If no, please attach the owner's name, address and a signed letter granting consent for the installation and operation of the facilities</b>	
Is the Applicant the operating authority of the facility that is the subject of this application? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <b>If no, please attach the operating authority name, address and phone number</b>	
Is the Project location in the area of the Niagara Escarpment Plan? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Is the Project location in the area subject to the Oak Ridges Moraine Conservation Plan? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Is the Project location in the Protected Countryside as shown in Schedule 1 to the Greenbelt Belt Plan? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Is the Project location in the Lake Simcoe Watershed as defined in the Lake Simcoe Protection Act, 2008? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Is the Project location in the Central Pickering Development Planning Area as shown in Schedule 1 to the Central Pickering Development Plan? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Has an Archaeological Report (s. 22) been prepared as part of the complete submission? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Has a Heritage Report (s.23) been prepared as part of the complete submission? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Has an Environmental Impact Study Report (s.38, s. 41 or s. 43) been prepared as part of the complete submission? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Has a Water body Report (s.39, s. 40, s.44 s. 45) been prepared as part of the complete submission? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

## Section 4: Required Documents – Table 1 of the Regulation

Form ID: 1056634

**4.1 Supporting Information Checklist** - This is a list of all supporting information to this application and is subject to the FOIPPA and EBR.

Mandatory	Attachment	Attached	Reference	Confidential* (√)
★ Yes	Proof of Legal Name of Applicant	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Attachment 1	<input type="checkbox"/>
★ Yes	A map that identifies the project location.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Attachment 2	<input type="checkbox"/>
★	Name, Address and Phone Number of the Operating Authority	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Attachment 3	<input type="checkbox"/>
★ Yes	Name, Address and consent of land/site owner for the installation/construction and operation of the facility	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Attachment 4	<input type="checkbox"/>
★ Yes	Project Description Report	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
★ Yes	Design and Operations Report	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
★ Yes	Decommissioning Plan Report	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
★ Yes	Construction Plan Report	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
★ Yes	Consultation Report	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
	Development Permit under the <i>Niagara Escarpment Planning and Development Act</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/>
★ Yes	A copy of this application has been sent to the local district office(s)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>

**Other Information Submitted in Support of the Application for a Renewable Energy Project**

Title	Reference	Confidential* (√)
★ Noise Assessment Study		<input type="checkbox"/>
★ Executive Summary		<input type="checkbox"/>
★ Natural Heritage Assessment Reports		<input type="checkbox"/>
★ Water Body Assessment Reports		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
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		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
Are you attaching an additional list of attachments? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If there is not enough space to list all of the attachments included in this application package, please include an additional listing of these attachments.	<input type="checkbox"/>

**\*Please note:** the release of information contained in application forms and documentation submitted in support of applications for approval is subject to the provisions of the *Freedom of Information and Protection of Privacy Act*. This Act defines what may and may not be disclosed to the public, and is used to assess all requests for information contained in the documents on file with an application for approval. The information submitted with an application for approval may also be subject to the *Environmental Bill of Rights*. In those situations, the application and the associated non-confidential supporting documentation is made available for review by members of the public. The applicants should therefore identify all documents or portions of documents as noted above which are to be considered confidential and must provide detailed evidence in support of this claim. This evidence will be one of the factors the ministry would consider when making a decision regarding disclosure of specific documents on file.

**Attachment 1**  
**Proof of Legal Name of Applicant**

Companies Act

Societies Act

**Information**

Company or Society name: RE WAUBAUSHENE 5 ULC

as of 2009-Nov-18 the Registered office is situated at:  
*(year / month / day)*

SUITE 900, 1959 UPPER WATER STREET  
*(civic number and street)* *(apt / suite / unit)*

HALIFAX Nova Scotia B3J 3N2  
*(town or municipality)* *(province)* *(postal code)*

Mailing address (if different from above): PO BOX 997  
*(number and street, PO box, etc.)* *(apt / suite / unit)*

HALIFAX Nova Scotia B3J 2X2  
*(town or municipality)* *(province or state)* *(postal code)*

Attention: \_\_\_\_\_  
*(first name and middle initial)* *(last name)*

Enter a phone number where you can be reached: 9024203200  
*(telephone number)*

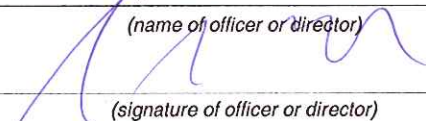
\_\_\_\_\_  
*(fax number)*

\_\_\_\_\_  
*(E-mail address)*


Please check to indicate if you prefer to have all correspondence from the Registry of Joint Stock Companies directed to the mailing address indicated above, as opposed to being directed to the Recognized Agent.

**Signatory**

Officer/director: CHARLES S. REAGH, ASST SECRETARY  
*(name of officer or director)*

  
*(signature of officer or director)*

Date: 2009-Nov-18  
*(year / month / day)*

**FILED ELECTRONICALLY**  
 in the computer records maintained by the  
 Registry of Joint Stock Companies  
 NOV 18 2009  
 per:   
 STEWART McKELVEY

For office use only

Registry #: 3241028

Date filed: \_\_\_\_\_



Nova Scotia

## CERTIFICATE OF INCORPORATION

Companies Act

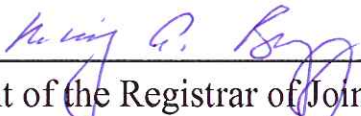
Registry Number

3241028

Name of Company

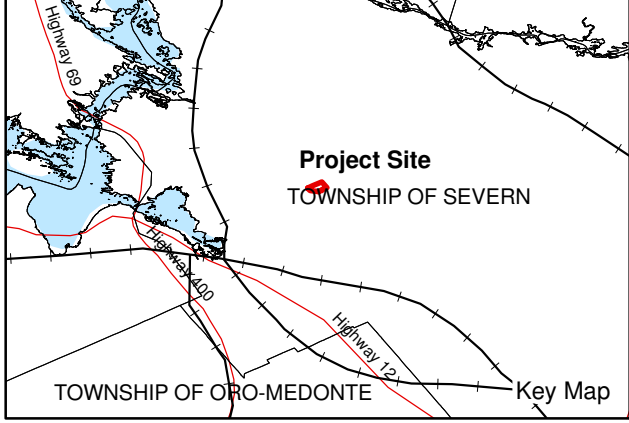
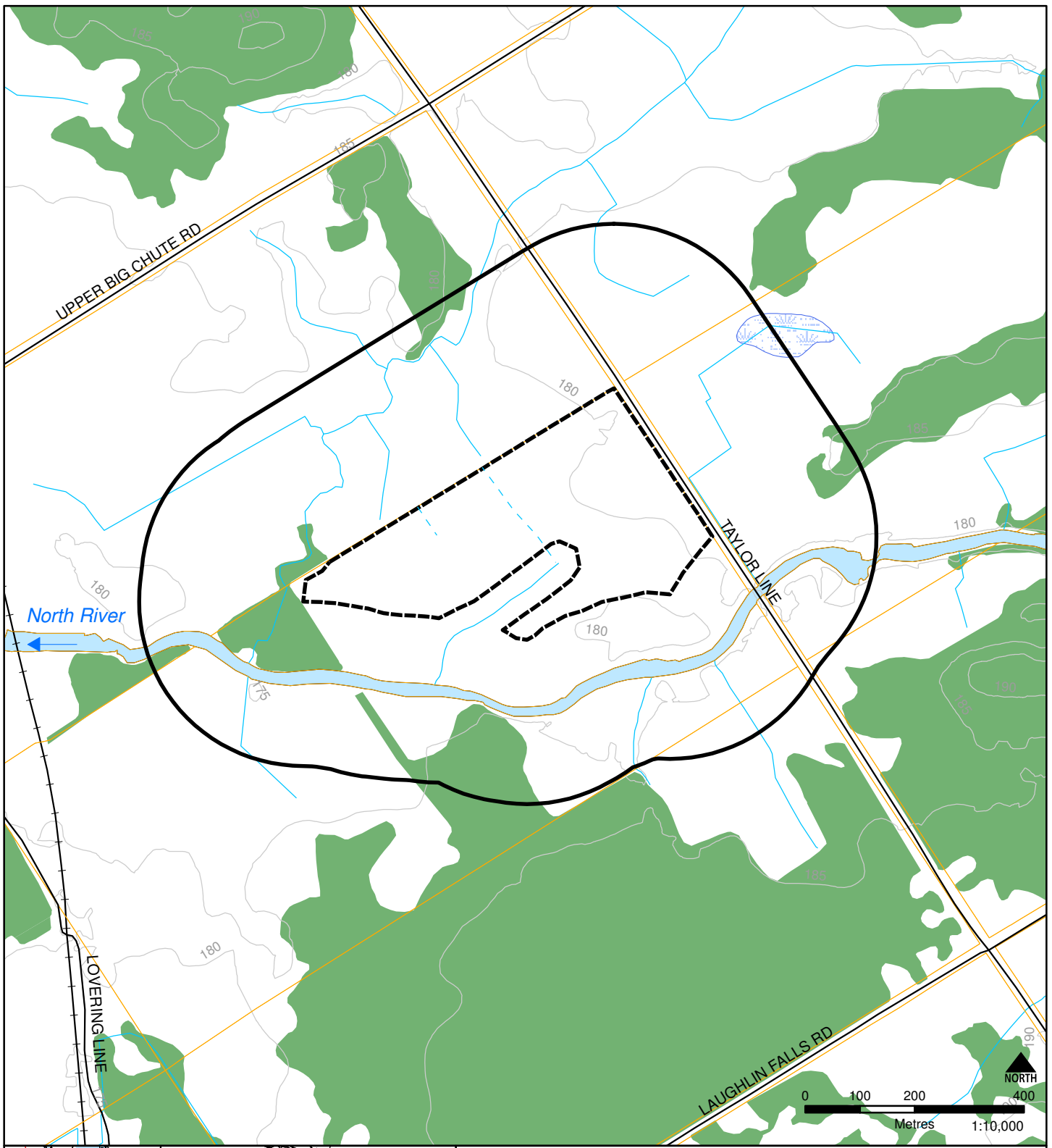
RE WAUBAUSHENE 5 ULC

I hereby certify that the above-mentioned company was incorporated this date under the Companies Act and that the liability of the members is unlimited.






  
\_\_\_\_\_  
Agent of the Registrar of Joint Stock Companies

November 18, 2009  
Date of Incorporation


**Attachment 2**  
**Map of Project Location**



**Legend**

-  Project Location
-  300 m from Project Location
-  Wooded Area
-  Watercourse
-  Grassed Waterway

Notes:  
 1. Spatial Referencing: UTM NAD 8  
 2. OBM and NRVIS data downloaded from LIO-MNR with permission

Figure 1.1  
 Recurrent Energy  
**RE Waubaushene 5**  
 Project Location 

P:\RECURRENT\334680\DATABASES\GIS\Midhurst\Waub5\_Doyle\GIS\Doyle\_Construction.mxd

**Attachment 3**  
**Operating Authority Contact Information**

**Operating Authority Contact Information**

RE Waubaushene 4 ULC  
300 California Street, 8<sup>th</sup> Floor  
San Francisco, CA 94101  
United States  
Phone: 415-675-1500  
Attention: Sheldon Kimber