



April 8, 2011

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

Dear Ms. Dumais:

**Subject: Northland Power Solar Crosby L.P. - Application for Renewable Energy Approval**

On behalf of Northland Power Solar Crosby L.P., I am pleased to submit the attached complete application for a Renewable Energy Approval (REA) for a Class 3 Solar Facility.

Enclosed, you will find the completed REA application for the Crosby Solar Project. All materials have been prepared in accordance with the requirements of Ontario Regulation 359/09.

As required, a copy of this cover letter and the enclosed complete submission has been sent to the Kingston District Office of the Ministry of the Environment.

At this time, we would request that you consider this information in relation to provision of a Renewable Energy Approval.

Please do not hesitate to contact me at 905-374-0701 x5280, or at [smale@hatch.ca](mailto:smale@hatch.ca) if you have any questions in relation to the above or the enclosed complete submission.

Sincerely,



Sean K. Male, M.Sc.  
REA Coordinator  
SKM:sg

cc: T. Dagilis, District Manager, MOE (Kingston District Office)  
Mike Lord, General Manager, Solar Development, Northland Power Inc.

## 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 |

## Application Summary

Project Name *(Project identifier to be used as a reference in correspondence)*

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)*

| Required Information             | Completed (yes or no) |
|----------------------------------|-----------------------|
| Project Name & Description       |                       |
| Section 1: Applicant Information |                       |
| Section 2: Project Information   |                       |
| Section 3: Site Information      |                       |
| Section 4: Required Documents    |                       |
| Application Status:              |                       |

### Summary:

|                                    |  |
|------------------------------------|--|
| Type of Application                | Type of Renewable Energy Generation Facility |
| Total Maximum Name Plate Capacity  |  |
| Total Expected Generation Capacity |  |

# 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)  |  | Business Identification Number |
| Business Name (the name under which the entity is operating or trading - also referred to as trade name)   |  | same as Applicant Name         |
| Applicant Type:<br>Corporation                      Federal Government<br>Individual                          Municipal Government<br>Partnership                        Provincial Government<br>Sole Proprietor                    Other (describe): _____ | North American Industry Classification System (NAICS) Code |                                |
| Business Activity Description (a description of the business endeavour, this may include products sold, services provided or machinery/equipment used, etc.)   |  |                                |

## 1.2 Applicant Physical Address

|  |                                |                                   |                |   |
|--|--------------------------------|-----------------------------------|----------------|---|
| Civic Address- Street information (includes street number, name, type and direction) |                                |                                   |                | Unit Identifier (i.e. apartment number) |
| Survey Address<br><i>(Not required if Street Information is provided)</i>            | Lot                            | Conc.                             | Part           | Reference Plan                          |
| Municipality /Unorganized Township   | County/District                | Province/State                    | Country        | Postal Code                             |
| Telephone Number (include area code & ext.)<br><br>ext.                              | Fax Number (include area code) | Mobile Number (include area code) | E-mail Address |   |

## 1.3 Applicant Mailing Address

|   |                     |   |             |   |
|---|---------------------|---|-------------|---|
| Same as Applicant Physical Address?   | Yes                 | 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) |                     |   |             | Unit Identifier (i.e. apartment number) |
| Delivery Designator   | Delivery Identifier | Postal Station  |             |   |
| Municipality /Unorganized Township  | Province/State      | Country   | Postal Code |   |

## 1.4 Statement of Applicant

|  |                                  |                |
|--|----------------------------------|----------------|
| <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 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 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)   | Title                            |                |
| Telephone Number (including area code & extension)<br><br>ext.   | Fax Number (including area code) | E-mail Address |
| Mobile Number (including area code)  | Signature                        | Date (y/m/d)   |

## Section 2: Project Information

### 2.1 Application Type

|   |   |  |                            |
|---|---|--|----------------------------|
| Type of Application:  |   |  |                            |
| New Renewable Energy Approval   | Where Applicable provide Existing Renewable Energy Approval Number: |  |                            |
| Amendment to Renewable Energy Approval  | _____   |  |                            |
| Application Initiated by:   |   |  |                            |
| Proponent   | Environmental Assessment and Approvals Branch                       | Provincial Officer Order (attach copy)             | 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) |                            |
| _____   |   | _____  |                            |

### 2.2 Statement of Project Technical Information Contact

|   |                                       |  |   |  |    |
|---|---------------------------------------|--|---|--|----|
| Is the Project Technical Information Contact the same as the Applicant (identified in Section 1)?   |                                       |  |   | Yes  | 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   |  |    |
| _____   |                                       |  | _____   |  |    |
| 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  |  |    |
| _____ ext.  | _____                                 | _____                                    | _____   |  |    |
| Signature (hard copy submission <b>MUST</b> be signed)  |                                       |  | Date (yyyy/mm/dd)   |  |    |
| _____   |                                       |  | _____   |  |    |
| Address Information:  |                                       |  |   |  |    |
| Same as Applicant Mailing Address?  |                                       | Yes                                      | 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> |    |
| _____   |                                       |  |   | _____  |    |
| Delivery Designator   |                                       | Delivery Identifier                      |   | Postal Station                                 |    |
| _____   |                                       | _____                                    |   | _____  |    |
| Municipality /Unorganized Township  |                                       | Province/State                           |   | Country  |    |
| _____   |                                       | _____                                    |   | _____  |    |
|   |                                       |  |   | Postal Code                                    |    |
|   |                                       |  |   | _____  |    |

**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<br>(yyyy/mm/dd) | Approval Number | Approval Date<br>(yyyy/mm/dd)                                  | Approval Number | Approval Date<br>(yyyy/mm/dd) |
|---|-------------------------------|-----------------|--|-----------------|-------------------------------|
|   |                               |                 |  |                 |                               |
|   |                               |                 |  |                 |                               |
|   |                               |                 |  |                 |                               |
| Ontario Power Authority (OPA) Registration ID (if applicable) |                               |                 | Ontario Power Authority (OPA) Reference Number (if applicable) |                 |                               |

**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 |
|---------------|----------------------------|------------------------------|----------------------------|------------------------------|
| Class 2       | Biofuel                    | Class 1                      | Class 1                    | Class 3                      |
| Class 3       | Biogas                     | Class 2                      | Class 2                    |                              |
| Class 4       | Other                      | Class 3                      | Class 3                    |                              |
| Class 5       | If other, please describe: |                              |                            |                              |
|               |                            |                              |                            |                              |

**2.5 Generation of Electricity**

| Total Maximum Name Plate Capacity     | Total Expected Generation Capacity    |
|---------------------------------------|---------------------------------------|
| MW (1 MW = 1000 kW / 1 kW = 0.001 MW) | MW (1 MW = 1000 kW / 1 kW = 0.001 MW) |
| Days and Hours of Operation           |                                       |
|                                       |                                       |

## Section 3: Site Information

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

|  |                 |                   |   |                |   |
|--|-----------------|-------------------|---|----------------|---|
| Same as Applicant Physical Address?  |                 | Yes               | 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) |
| Survey Address<br><i>(Legal description of the site)</i>   | Lot             | Conc.             | Part  | Reference Plan |   |
| Municipality / Unorganized Township  | County/District |                   | Postal Code   |                |   |
| Non Address Information (where the project spans many locations or a large rural area, specify how the project area relates to the address provided) |                 |                   |   |                |   |
| Geo Reference (southwest corner of property)   |                 |                   |   |                |   |
| Map Datum  | Zone            | Accuracy Estimate | Geo Referencing Method                                    | UTM Easting    | UTM Northing                            |

### 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          |     |    |
| Clerk's Name  |  | Clerk's Phone/Fax               |  | E-Mail Address |     |    |
| Is the project location situated in one or more Upper Tier Municipality? (i.e., county, regional or district municipality.)   |  |                                 |  |                | Yes | No |
| <i>List all Upper Tier Municipalities that the project location is situated in. Attach a separate list if more space is necessary</i>   |  |                                 |  |                |     |    |
| Name of Municipality  |  | Address                         |  | Phone          |     |    |
| Clerk's Name  |  | Clerk's Phone/Fax               |  | E-Mail Address |     |    |
| Is the project location situated in a Local Roads Area?   |  |                                 |  |                | Yes | No |
| <i>List all Local Roads Areas that the project location is situated in. Attach a separate list if more space is necessary</i>   |  |                                 |  |                |     |    |
| 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?  |  |                                 |  |                | Yes | No |
| <i>List all Local Service Board areas the project location is situated in. Attach a separate list if more space is necessary</i>  |  |                                 |  |                |     |    |
| 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  | MOE District Office   |
| Is in any portion of the Project location on federally owned land or a reserve?  |   |
| Yes  | No  |
| Is in any portion of the Project location on Crown Land?   |   |
| Yes  | No  |
| Is the Project location that is the subject of this application owned by the Applicant?  |   |
| Yes  | No <b><i>If no, please attach the owner's name, address and a signed letter granting consent for the installation and operation of the facilities</i></b> |
| Is the Applicant the operating authority of the facility that is the subject of this application?  |   |
| Yes  | No <b><i>If no, please attach the operating authority name, address and phone number</i></b>  |
| Is the Project location in the area of the Niagara Escarpment Plan?  |   |
| Yes  | No  |
| Is the Project location in the area subject to the Oak Ridges Moraine Conservation Plan?   |   |
| Yes  | No  |
| Is the Project location in the Protected Countryside as shown in Schedule 1 to the Greenbelt Belt Plan?                                      |   |
| Yes  | No  |
| Is the Project location in the Lake Simcoe Watershed as defined in the Lake Simcoe Protection Act, 2008?                                     |   |
| Yes  | No  |
| Is the Project location in the Central Pickering Development Planning Area as shown in Schedule 1 to the Central Pickering Development Plan? |   |
| Yes  | No  |
| Has an Archaeological Report (s. 22) been prepared as part of the complete submission?   |   |
| Yes  | No  |
| Has a Heritage Report (s.23) been prepared as part of the complete submission?   |   |
| Yes  | No  |
| Has an Environmental Impact Study Report (s.38, s. 41 or s. 43) been prepared as part of the complete submission?                            |   |
| Yes  | No  |
| Has a Water body Report (s.39, s. 40, s.44 s. 45) been prepared as part of the complete submission?  |   |
| Yes  | No  |

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

### 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*<br>(√) |
|--|--|--|----|-----------|----------------------|
|  | Proof of Legal Name of Applicant   | Yes  | No |           |                      |
|  | A map that identifies the project location.  | Yes  | No |           |                      |
|  | Name, Address and Phone Number of the Operating Authority  | Yes  | No |           |                      |
|  | Name, Address and consent of land/site owner for the installation/construction and operation of the facility | Yes  | No |           |                      |
|  | Project Description Report   | Yes  | No |           |                      |
|  | Design and Operations Report   | Yes  | No |           |                      |
|  | Decommissioning Plan Report  | Yes  | No |           |                      |
|  | Construction Plan Report   | Yes  | No |           |                      |
|  | Consultation Report  | Yes  | No |           |                      |
|  | Development Permit under the <i>Niagara Escarpment Planning and Development Act</i>                          | Yes  | No |           |                      |
|  | A copy of this application has been sent to the local district office(s)                                     | Yes  | No |           |                      |
| Other Information Submitted in Support of the Application for a Renewable Energy Project |  |  |    |           |                      |
|  | Title  | Reference  |    |           | Confidential*<br>(√) |
|  |  |  |    |           |                      |
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|  |  |  |    |           |                      |
|  |  |  |    |           |                      |
| Are you attaching an additional list of attachments?                                     |  | 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. |    |           |                      |
| Yes          No  |  |  |    |           |                      |

**\*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**

For Ministry Use Only  
 À l'usage exclusif du ministère  
 Ministry of  
 Government Services

Ministère des  
 Services gouvernementaux

Ontario Corporation Number  
 Numéro de la société en Ontario

1811372

Ontario  
**CERTIFICATE**  
 This is to certify that these articles  
 are effective on

**CERTIFICAT**  
 Ceci certifie que les présents statuts  
 entrent en vigueur le

**NOVEMBER 25 NOVEMBRE, 2009**

Director / Directrice  
 Business Corporations Act / Loi sur les sociétés par actions

**ARTICLES OF INCORPORATION  
 STATUTS CONSTITUTIFS**

Form 1  
 Business  
 Corporations  
 Act

Formule 1  
 Loi sur les  
 sociétés par  
 actions

1. The name of the corporation is: (Set out in BLOCK CAPITAL LETTERS)  
 Dénomination sociale de la société : (Écrire en LETTRES MAJUSCULES SEULEMENT)

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| N | O | R | T | H | L | A | N | D | P | O | W | E | R | S | O | L | A | R | C | R | O | S | B | Y | G |
| P | I | N | C | . |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

2. The address of the registered office is:  
 Adresse du siège social :

30 St. Clair Avenue West, Suite 1700

(Street & Number or R.R. Number & if Multi-Office Building give Room No.)  
 (Rue et numéro ou numéro de la R.R. et, s'il s'agit d'un édifice à bureaux, numéro du bureau)

Toronto,

ONTARIO M 4 V 3 A 1

(Name of Municipality or Post Office)  
 (Nom de la municipalité ou du bureau de poste)

(Postal Code)  
 (Code postal)

3. Number of directors is/are:  
 Nombre d'administrateurs :

Fixed number  
 Nombre fixe

OR minimum and maximum  
 OU minimum et maximum

|   |    |
|---|----|
| 1 | 10 |
|---|----|

4. The first director(s) is/are:  
 Premier(s) administrateur(s) :

First name, middle names and surname  
 Prénom, autres Prénoms et nom de famille

Address for service, giving Street & No. or R.R. No.,  
 Municipality, Province, Country and Postal Code  
 Domicile élu, y compris la rue et le numéro, le numéro de la  
 R.R. ou le nom de la municipalité, la province, le pays et le  
 code postal

Resident Canadian?  
 Yes or No  
 Résident canadien?  
 Oui/Non

Anthony F. Anderson

30 St. Clair Avenue West,  
 Suite 1700  
 Toronto, Ontario M4V 3A1

Yes



Print clearly in CAPITAL LETTERS / Écrivez clairement en LETTRES MAJUSCULES Page \_\_\_\_ of / de \_\_\_\_

1. Declaration Type / Type de déclaration. A. [checked] New / Nouvelle. B. [ ] Name Change / Modification de la raison sociale. C. [ ] Change (other than name change) / Changement (autre que modification de la raison sociale). D. [ ] Renewal Without Name Change / Renouvellement sans modification de la raison sociale. E. [ ] Renewal With Name Change / Renouvellement avec modification de la raison sociale. F. [ ] Dissolution / Dissolution. G. [ ] Withdrawal / Retrait. Enter the Business Identification Number (BIN) for all Declaration Types except Type A. / Entrez le n° d'identification de l'entreprise (NIE) pour tous les types de déclaration, sauf pour le type A. BIN (Business Identification No.) / NIE N° d'identification de l'entreprise

2. Firm Name / Raison sociale de la société en commandite: NORTHLAND POWER SOLAR CROSBY L.P.

3. Mailing Address of Registrant / Adresse postale de registrant. Street No. / N° de rue: 30. Street Name / Nom de la rue: ST. CLAIR AVENUE WEST. Suite No. / Bureau n°: 1700. City / Town / Ville: TORONTO. Province / Province: ONTARIO. Country / Pays: CANADA. Postal Code / Code postal: M4V 3A1.

4. Address of Principal Place of Business in Ontario / Adresse de l'établissement principal en Ontario. [checked] Same as above / comme ci-dessus. [ ] Extra-Provincial Limited Partnership without business address in Ontario / Société en commandite extraprovinciale sans établissement en Ontario. Street No. / N° de rue: Suite No. / Bureau n° (P.O. Box not acceptable / Case postale non acceptés): City / Town / Ville: Province / Province: Country / Pays: Postal Code / Code postal:

5. General Nature of Business / Nature générale de l'activité exercée: ELECTRICITY GENERATION

6. Information Regarding General Partner(s) / Renseignements sur le ou les commandités. (A) Individual / Personne physique - Last Name / Nom de famille: First Name / Prénom: Middle Name / Autre prénom: (B) Corporation, Partnership etc. / Personne morale, société en nom collectif etc. - Name / Raison sociale: NORTHLAND POWER SOLAR CROSBY GP INC. Ontario Corporation Number / N° matricule de la personne morale en Ontario: 1811372. Address / Adresse: Street No. / N° de rue: 30. Street Name / Nom de la rue: ST. CLAIR AVENUE WEST. Suite No. / Bureau n°: 1700. City / Town / Ville: TORONTO. Province / Province: ONTARIO. Country / Pays: CANADA. Postal Code / Code postal: M4V 3A1. Signature of General Partner or Attorney for the General Partner / Signature du commandité ou de son procureur: [Signature] X. Check if signing as attorney on behalf of the general partner pursuant to s. 32 of the Limited Partnerships Act. / Cochez la case ci contre si le signataire est le procureur du commandité (art. 32 de la Loi) [ ]. Print Name of Signatory / Nom du signataire en lettres moulées: ANTHONY F. ANDERSON. For a new Declaration, name change or renewal, item 6 must be completed and signed by all the general partners or their attorneys. / Pour une nouvelle Déclaration, une modification de la raison sociale ou un renouvellement, il faut remplir la section 6 pour chaque commandité, et chaque commandité ou son procureur doit signer la section 6. S'il y a plus d'un commandité, entrez le nombre total de commandités dans la case ci contre et remplissez et joignez une ou des annexes. Number of General Partners / Nombre de commandités: 1

7. Jurisdiction of Formation / Territoire d'origine: ONTARIO

Extra-Provincial Limited Partnership Carrying on Business in Ontario / Société en commandite extraprovinciale menant des activités en Ontario

8. Information Regarding Attorney/Representative for an Extra-Provincial Limited Partnership - (Does not apply to limited partnerships formed in another Canadian jurisdiction that have an office or other place of business in Ontario) / Renseignements sur le procureur / représentant de la société en commandite extraprovinciale - (Ne s'applique pas aux sociétés en commandite d'un autre territoire canadien qui ont un établissement en Ontario). Power of Attorney - Check the box to confirm there is an executed Power of Attorney (Form 4) appointing the person/corporation listed below to be the attorney and representative in Ontario. / Procuration - Cochez la case ci-contre pour confirmer qu'il y a une Procuration signée (Formule 4) nommant la personne physique ou morale indiquée ci dessous à titre de procureur et représentant en Ontario. Celui ci doit tenir la Formule 4 signée à disposition aux fins d'inspection à l'adresse ci dessous. [ ]. Attorney / Representative - Procureur / représentant. (A) Individual / Personne physique - Last Name / Nom de famille: First Name / Prénom: Middle Name / Autre prénom: (B) Corporation, Partnership etc. / Personne morale, société en nom collectif etc. - Name / Raison sociale: Ontario Corporation Number / N° matricule de la personne morale en Ontario: Address / Adresse: Street No. / N° de rue: Street Name / Nom de la rue: Suite No. / Bureau n°: City / Town / Ville: Province / Province: Country / Pays: Postal Code / Code postal: MINISTRY USE ONLY - RÉSERVÉ AU MINISTÈRE. BIN/EIN: 191194927. NORTHLAND POWER SOLAR CROSBY L.P.

5. Restrictions, if any, on business the corporation may carry on or on powers the corporation may exercise.  
*Limites, s'il y a lieu, imposées aux activités commerciales ou aux pouvoirs de la société.*

None.

6. The classes and any maximum number of shares that the corporation is authorized to issue:  
*Catégories et nombre maximal, s'il y a lieu, d'actions que la société est autorisée à émettre :*

An unlimited number of Common Shares.

7. Rights, privileges, restrictions and conditions (if any) attaching to each class of shares and directors authority with respect to any class of shares which may be issued in series:  
*Droits, privilèges, restrictions et conditions, s'il y a lieu, rattachés à chaque catégorie d'actions et pouvoirs des administrateurs relatifs à chaque catégorie d'actions qui peut être émise en série :*

#### Common Shares

**Voting:** The holders of the Common Shares shall be entitled to one vote in respect of each Common Share held at any meeting of the shareholders of the corporation except meetings at which only holders of a specified class or series of shares are entitled to vote.

**Dividends:** The holders of the Common Shares shall be entitled to receive dividends as and when declared by the directors in their discretion from time to time out of moneys of the corporation properly applicable to the payment of dividends.

**Winding-Up:** In the event of the liquidation, dissolution or winding-up of the corporation or other distribution of the assets of the corporation among its shareholders, the holders of the Common Shares shall be entitled to share pro rata in the distribution of the balance of the assets of the corporation.

8. The issue, transfer or ownership of shares is/is not restricted and the restrictions (if any) are as follows:  
*L'émission, le transfert ou la propriété d'actions est/n'est pas restreint. Les restrictions, s'il y a lieu, sont les suivantes :*

The transfer of shares is subject to the restrictions on the transfer of securities set out in Section 9 .



## 9. Other provisions if any:

*Autres dispositions, s'il y a lieu :*

(a) No securities (other than non-convertible debt securities) of the corporation shall at any time be transferred to any person without either (i) the consent of the directors to be signified by a resolution passed by the board or by an instrument or instruments in writing signed by a majority of the directors, or (ii) the consent of the shareholders of the corporation to be signified either by a resolution passed by the shareholders or by an instrument or instruments in writing signed by the holders of shares of the corporation which shares represent a majority of the votes attributable to all of the issued and outstanding shares of the corporation carrying the right to vote.

(b) The board of directors may from time to time on behalf of the corporation, without authorization of the shareholders:

(i) borrow money on the credit of the corporation;

(ii) issue, reissue, sell or pledge or hypothecate bonds, debentures, notes or other evidences of indebtedness of the corporation, whether secured or unsecured;

(iii) give a guarantee on behalf of the corporation to secure performance of any present or future indebtedness, liability or obligation of any person; and

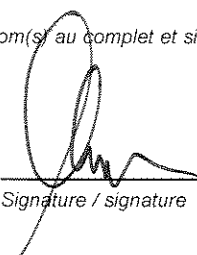
(iv) mortgage, hypothecate, pledge or otherwise create a security interest in all or any currently owned or subsequently acquired real or personal, movable or immovable, property of the corporation including book debts, rights, powers, franchises and undertakings, to secure any such bonds, debentures, notes or other evidences of indebtedness or any guarantees or any other present or future indebtedness, liability or obligation of the corporation.

The board of directors may from time to time delegate to one or more of the directors and officers of the corporation as may be designated by the board all or any of the powers conferred on the board in this Section 9(b) to the extent and in the manner as the board shall determine at the time of such delegation.

10. The names and addresses of the incorporators are:  
*Noms et adresses des fondateurs :*

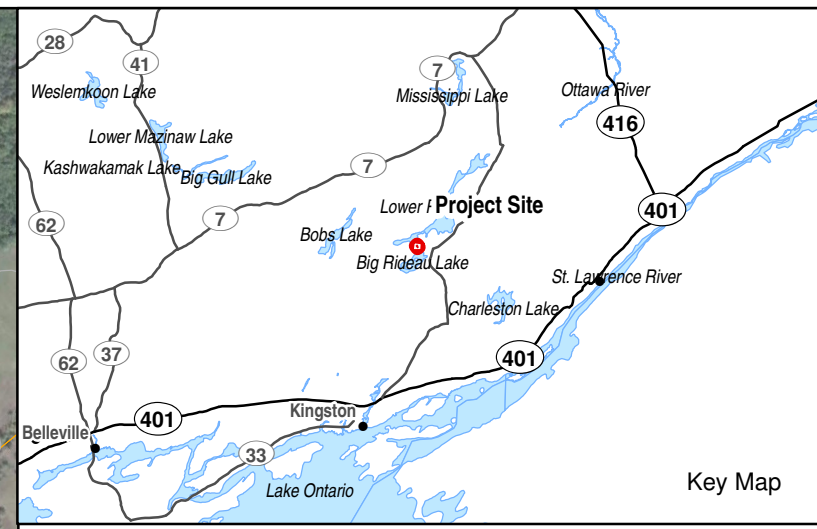
| First name, middle names and surname or corporate name<br><i>Prénom, autres prénoms et nom de famille ou dénomination sociale</i> | Full address for service or if a corporation, the address of the registered or head office giving street & No. or R.R. No., municipality, province, country and postal code<br><i>Domicile élu au complet ou, dans le cas d'une société, adresse du siège social ou adresse de l'établissement principal, y compris la rue et le numéro ou le numéro de la R.R., la municipalité, la province, le pays et le code postal</i> |
|---|--|
| Anthony F. Anderson   | 30 St. Clair Avenue West,<br>Suite 1700<br>Toronto, Ontario M4V 3A1  |

These articles are signed in duplicate.  
*Les présents statuts sont signés en double exemplaire.*






|   |   |
|---|---|
| Full name(s) and signature(s) of incorporator(s). In the case of a corporation set out the name of the corporation and the name and office of the person signing on behalf of the corporation<br><i>Nom(s) au complet et signature(s) du ou des fondateurs. Si le fondateur est une société, indiquer la dénomination sociale et le nom et le titre de la personne signant au nom de la société</i> |   |
| <br>_____<br><i>Signature / signature</i>  | Anthony F. Anderson<br>_____<br>Name of incorporator (or corporation name & signatories name and office)<br><i>Nom du fondateur (ou dénomination sociale et nom et titre du signataire)</i> |
| _____<br><i>Signature / signature</i>   | _____<br>Name of incorporator (or corporation name & signatories name and office)<br><i>Nom du fondateur (ou dénomination sociale et nom et titre du signataire)</i>                        |
| _____<br><i>Signature / signature</i>   | _____<br>Name of incorporator (or corporation name & signatories name and office)<br><i>Nom du fondateur (ou dénomination sociale et nom et titre du signataire)</i>                        |
| _____<br><i>Signature / signature</i>   | _____<br>Name of incorporator (or corporation name & signatories name and office)<br><i>Nom du fondateur (ou dénomination sociale et nom et titre du signataire)</i>                        |

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





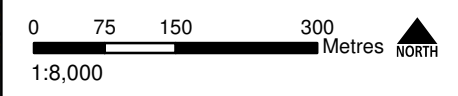


**Legend**

-  Roads
-  Transmission Line
-  Topographic Contour (5m interval)
-  Watercourse
-  Parcels

**Project Components**

-  Connection Point With Distribution Line
-  Project Location



Notes:  
 1. OBM and NRVIS data downloaded from LIO, with permission.  
 2. Spatial referencing UTM NAD 83.  
 3. Satellite imagery from Google Earth Pro



**Attachment 3**  
**Landowner Consent**