



BY ELECTRONIC FILING

Hon. Kathleen H. Burgess, Secretary
New York State Public Service Commission
Albany, New York 12223-1350

January 31, 2017

Re: NYPSC Matter No. 14-02554
Annual Update to Retail Access Application Filing for Aspurity Energy LLC

Dear Secretary Burgess:

Pursuant to the New York Public Service Commission's requirements for eligible ESCOs as delineated in the *Uniform Business Practices*, please find below and enclosed the annual updates to Aspurity Energy LLC's Retail Access Application Filing (RAAF).

Since our last substantive update to the RAAF, filed on June 28, 2016, we have two changes to report:

- Change to EXECUTIVE CONTACT INFORMATION
- Change to MARKETING CONTACT INFORMATION

Changes are marked in the enclosed document with a red "CHANGE" on each line, as appropriate.

All other information contained in our original RAAF, or as provided in previous updates, remains current and accurate.

If you have any questions about this information, please contact Mike Plehal, Director of Operations, at 763-432-1556 or mikeplehal@aspurityenergy.com.

Respectfully,

Wiley Sharp III
Chief Financial Officer
Aspurity Energy LLC

New York State Department of Public Service

**Energy Service Company (ESCO)
RETAIL ACCESS APPLICATION FORM**

Please e-file completed application in matter number **15-00555**.

To register for an e-filer user account, please visit:

<http://www3.dps.ny.gov/W/PSCWeb.nsf/All/CC256BE982C58CF785257687006F39CE?OpenDocument>

Use additional sheets as necessary

1. Business Information

Business Name: Aspirity Energy LLC
Address: 701 Xenia Avenue South, Suite 475
City: Minneapolis State: MN ZIP: 55416
Telephone: (763) 432-1500 Fax: (763) 432-1515

If you intend to market your services under other name(s) (e.g., d/b/a, alias) please list here:
NO

Do you currently have any energy affiliates (including subsidiaries) located or operating within New York State?
NO

If yes, please provide the contact information for any entity with an ownership interest of 10 percent or more in the company(ies) listed above? N/A

Business Name: _____
Contact Person: _____
Address: _____
City: _____ State: _____ ZIP: _____
Telephone: _____ Fax: _____
Email: _____

During the previous 36 months, have any criminal or regulatory sanctions been imposed for any senior officer of the ESCO applicant, its subsidiaries or its energy affiliates listed above?
NO

If yes, please provide the following information:

Name: _____
Title: _____
Name: _____
Title: _____
Name: _____
Title: _____

2. Contact Information

Executive Contact (INFORMATION REQUIRED)

Please provide the contact information for the person designated as the Executive Contact:

Name: Scott C. Lutz CHANGE

Title: President & CEO

Address: 701 Xenia Avenue South, Suite 475

City: Minneapolis State: MN ZIP: 55416

Telephone: (763) 432-1500 Fax: (763) 432-1515 CHANGE

Email: scottlutz@aspirityholdings.com CHANGE

Regulatory Contact (INFORMATION REQUIRED)

THE REGULATORY CONTACT WILL RECEIVE ALL CORRESPONDENCE REGARDING COMPLIANCE FILINGS.

Please provide the contact information for the person designated as the Regulatory Contact:

Name: Mike Plehal

Title: Director of Operations

Address: 701 Xenia Avenue South, Suite 475

City: Minneapolis State: MN ZIP: 55416

Telephone: (763) 432-1556 Fax: (763) 432-1515

Email: mikeplehal@aspirityenergy.com

Marketing Contact (INFORMATION REQUIRED)

Please provide the contact information for the person designated as the Marketing Contact:

Name: Mike Grinberg CHANGE

Title: Director of Marketing CHANGE

Address: 701 Xenia Avenue South, Suite 475

City: Minneapolis State: MN ZIP: 55416

Telephone: (763) 432-1517 Fax: (763) 432-1515 CHANGE

Email: mikegrinberg@aspirityenergy.com CHANGE

Public Information for Power to Choose Website (INFORMATION REQUIRED)

Marketing web page: www.aspirityenergy.com

Customer Service Email: info@aspirityenergy.com

Toll Free Number: (888) 984-3052

Vendor Contact (IF APPLICABLE)

Please provide the following contact information for vendors you intend to use (e.g., EDI):

Vendor Name: OpSolve LLC

Address: The Gulf Tower, 701 Grant Street, Suite 1015

City: Pittsburgh State: PA ZIP: 15219

Contact Name: Casey Min

Telephone: (770) 235-8945 Fax: _____

Email: emin@opsolve.com

3. Eligibility Filing Requirements

REQUIRED OF NEW APPLICANTS ONLY

Incomplete Applications, including eligibility filing requirements, will not be processed

The following must be provided with your completed application:

- Copy, and proof of acceptance, of your registration with the NYS Department of State
- Comprehensive copy of your standard Sales Agreement(s), including presentation of Customer Disclosure Statement
- Marketing Representative ID Badge
- Marketing Standards Quality Assurance Plan
- Sample forms of notices to be sent upon:
 - Assignment of sales agreements
 - Discontinuance of service
 - Transfer of 5000 or more customers to other providers
- Sample(s) of your billing format(s)
- Procedures you will use to obtain customer's authorization for historic usage and credit information
- Copies of informational and promotional materials used for mass marketing purposes
- HEFPA documents, if providing energy supply to residential customers
 - Residential Payment Agreement
 - Asset Evaluation
 - Budget Billing Plan
 - Quarterly Billing
 - Past Due Reminder
 - Notification to Social Services of Customer Inability to Pay
 - Final Termination Notice
 - Final Suspension Notice
- Internal procedures for the prevention of slamming or cramming
- A list of entities, including contractors and sub-contractors, that will market on behalf of your ESCO.
- Attestation that you will comply with the requirements of New York State's Environmental Disclosure Program, if you intend to serve electric customers
- NYS DPS Office of Consumer Services Service Provider Form

If any information required with this application package is not enclosed, please attach a detailed explanation, and when it will be provided.

4. Identify the Types and Locations of Markets

Place an "x" in the applicable cells of the table below to 1) designate the individual Utility retail access programs in which you participate, or intend to participate, and the customer market(s) in each program you serve, or intend to serve 2) indicate the commodities you offer, or intend to offer, in each service territory, and 3) indicate the billing options you offer, or intend to offer, in each territory.

The designation "N/A" indicates that either a commodity or billing option is not available in a specific service territory. Note that dual billing capability is required for all ESCOs and utilities.

Utility	Customer Markets		Commodity		Billing Options		
	Residential	Nonresidential	Natural Gas	Electricity	Utility Rate Ready Consolidated	Utility Bill Ready Consolidated	Single Retailer
Central Hudson	x			x		N/A	N/A
Con Edison	x			x		N/A	N/A
Corning NG				N/A	N/A	N/A	N/A
LIPA			N/A		N/A	N/A	N/A
Natl. Grid (Downstate)				N/A	N/A		N/A
Natl. Grid (Upstate)	x			x		N/A	N/A
NFG				N/A		N/A	
NYSEG	x			x	N/A		N/A
O&R	x			x		N/A	N/A
RG&E	x			x	N/A		N/A
St. Lawrence				N/A	N/A	N/A	N/A

5. Signature

The person signing this application attests to the following: that she or he is an owner, partner, or officer of the business named on this application, the answers and materials contained in this application package are true and the application package submitted is complete and accurate. An ESCO that knowingly makes false statements in this application package is subject to denial or revocation of eligibility.

Signature WHS Print Name Wiley Sharp III

Title Chief Financial Officer Date 1/31/17