ESSENTIAL POWER
TRUST YOUR POWER TO US!

September 27, 2022

Re: Application for DERS Approval

Dear Secretary of the State,

Please find enclosed the New York State Public Service Commission Office of Consumer Services Service Provider Contact Information DISTRIBUTED ENERGY RESOURCE SUPPLIER (DERS) REGISTRATION FORM.

Please feel free to contact me for any missing information or questions.

Thank you,

Sean Deptula

Sean Deptula
Owner and CEO
NYS Essential Power, Inc.

New York State Public Service Commission
Office of Consumer Services
Service Provider Contact Information

Completed forms should be submitted by fax to 518-472-8501

Date 09/27/22

Company Name NYS Essential Power, Inc.

Service Type (Check all that apply): **Gas** ☐ **Elec** ☐ **ESCO** ☐ **Cable TV** ☐
Water ☐ **ILEC** ☐ **CLEC** ☐ **Toll Only** ☐ **Other** Solar Installation

President Sean Deptula
Mailing Address 12 Sarah Court, Deer Park, NY 11729

Email Address sean@essentialpower.net
Phone Number 631-398-3574 Fax Number _____

Vice President / Director of Customer Service _____
Mailing Address _____

Email Address _____
Phone Number _____ Fax Number _____

Primary Regulatory Complaint Manager _____
Mailing Address _____

Email Address _____
Phone Number _____ Fax Number _____

Secondary Regulatory Complaint Manager _____
Mailing Address _____

Email Address _____
Phone Number _____ Fax Number _____

The PSC electronically transmits consumer complaints to service providers. You must identify a fax number and/or an email address box that is shared by a group of people. (NOTE: WE WILL NOT SEND COMPLAINTS TO PERSONAL EMAIL ADDRESSES. A SHARED EMAIL ADDRESS MUST BE IDENTIFIED OR THE TRANSMISSION WILL DEFAULT TO THE FAX NUMBER) Please identify the address/es to which we should transmit our complaints:

Email: sean@essentialpower.net **Fax:** _____

DISTRIBUTED ENERGY RESOURCE SUPPLIER (DERS) REGISTRATION FORM

Pursuant to the Public Service Commission's October 19, 2017 Order Establishing Oversight Framework and Uniform Business Practices for Distributed Energy Resource Suppliers in Case 15-M-0180 and to the Uniform Business Practices for DER Suppliers (UBP-DERS) adopted in that order, CDG Providers[1] and On-Site Mass Market DG Providers[2] are required to submit this form. Subsidiaries and partners, including contractors, subcontractors, special purpose entities, and tax equity investors, are not required to submit this form as long as a registered CDG Provider is part of and responsible for ensuring compliance with respect to each project.

FILL OUT AND SUBMIT THIS FORM IN MATTER 17-02273: IN THE MATTER OF REGISTRATION FOR DER SUPPLIERS[3]

(Attach additional sheets as necessary)

1. Business Information

Business Name: NYS Essential Power, Inc.

Address: 333 Smith Road

City: Shirley State: NY Zip: 11967

Telephone: 631-398-3574 Website: www.nyessentialpower.com

[1] Defined as "an entity that is acting or planning to act as a CDG Sponsor for one or more CDG projects, or that is otherwise engaged in soliciting customers, members, or subscribers for a CDG project or CDG projects, through its own employees or agents, on its own behalf. A CDG Sponsor is the entity that organizes, owns, and/or operates a CDG project."

[2] Defined as "an entity that is engaged in soliciting mass market customers for a project or service that involves the installation of distributed generation equipment, such as solar panels, on the property of those mass market customers, through its own employees or contractors, on its own behalf rather than as a contractor."

[3] Instructions on registering and filing are available at http://www3.dps.ny.gov/W/PSCWeb.nsf/All/4BDF59B70BABE01585257687006F3A57?OpenDocument

If you intend to market your services under a DBA, provide a copy of your certificate of assumed name and list the name(s) here: _____

_____

Type of Provider

CDG Provider_____Mass Market On-Site DG Provider_____Both_____

Energy Source: (i.e. solar, wind, etc.) Solar

Provide the contact information for any affiliates conducting energy-related business (including subsidiaries and parent corporations) within New York State or elsewhere.

Business Name:_____

Contact Name:_____

Address:_____

City:_____State:_____Zip:_____

Telephone:_____Fax:_____

Email Address:_____

Provide the contact information for any parent company or other corporate entity with an ownership interest of 10 percent or more of the registrant:

Business Name:_____

Contact Name:_____

Address:_____

City:_____State:_____Zip:_____

Telephone:_____Fax:_____

Email Address:_____

During the previous 24 months, have any criminal or regulatory sanctions been imposed on the registrant, any senior officer of the registrant, any corporate entity with corporate entity with an ownership interest of 10 percent or any energy affiliates listed above?

Yes_____ No X

If yes, identify the entities or individuals subject to sanctions and provide a detailed explanation of the sanctions:

Disclose any decisions or pending escalated regulatory actions in other states that affect the registrant's ability to operate in that state, such as suspension, revocation, or limitation of operating authority:

List and describe any current formal investigations involving the registrant being conducted by law enforcement or regulatory entities:

List and explain any acquisitions, mergers, dissolutions, or bankruptcy involving the registrant that occurred in the previous 24 months:

List and describe of any security breaches associated with customer proprietary information in the last 24 months that involved the registrant, including a thorough description of the actions taken in response to any such instances:

2. Contact Information

The contacts listed below must be direct contacts for individuals. ~~D~~irect phone numbers with extensions must be provided for each contact. No shared mailboxes will be accepted. Staff will not share these contacts with the general public.

Executive Contact (Owner, CEO, or Executive responsible for New York service)

Name and Title: Sean Deptula

Address: 12 Sarah Court

City: Deer Park State: NY Zip: 11729

Telephone: 631-398-3574 Fax: _____

Email Address: sean@essentialpower.net

Regulatory Contact (Individual(s) Responsible for Ensuring Compliance with Regulatory Requirements)

Name and Title: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

Email Address: _____

Marketing Contact (Individual(s) Responsible for Responding to Consumer Inquiries and Complaints)

Name and Title: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

Email Address: _____

3. Additional Requirements

(Required for New Registrants and Triennial Filings)

- Copy and proof of acceptance of your registration with the NYS Department of State and a copy of your certificate of assumed name (if applicable);
- Sample sales agreements, including customer disclosure statement, and sample bills for each customer class for each material category of the CDG or On-Site Mass Market products or services that will be offered;
- Copies of information and promotional materials used for mass marketing purposes for each product offering;
- A list of entities, including contractors and sub-contractors, that market on behalf of your company;
- NYS DPS Office of Consumer Services Service Provider Form.

4. 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 registration package, the answers and materials contained in this registration package are true and the registration package submitted is complete and accurate. A DER Supplier that knowingly makes false statements in this registration package is subject to denial or revocation of eligibility.

Signature: Sean Deptula Print Name: Sean Deptula

Title: Owner/CEO Date: 9/21/2022

Company Name: NYS Essential Power, Inc.