

IN THE MATTER OF the *Public Utilities Act*,
R.S.N. 1990, Chapter 47 (the “Act”);

AND IN THE MATTER OF a General Rate Application filed by Newfoundland and Labrador Hydro on July 28, 2017, for a full review of its costs and rates and approval of (i) rates to be charged for the supply of power and energy to its customers effective on an interim basis January 1, 2018; (ii) rates to be charged for the supply of power and energy to its customers effective on a final basis January 1, 2019; and (iii) rules and regulations applicable to the supply of power and energy to its customers.

INTERVENOR SUBMISSION

The Consumer Advocate (the “Consumer Advocate”) appointed as set out in Section 117 of the *Public Utilities Act* will intervene in the above referenced Application to represent these purposes:

- (a) To represent consumers in all matters pertaining to the Application;
- (b) To advocate that the Board apply the policy established under the *Electrical Power Control Act* 1994 (the “Act”) and in particular to ensure that the Application will result in power being delivered to consumers at the lowest possible cost consistent with reliable service;
- (c) To attend conferences and hearings, as the case may be, and to file Requests for Information and written submission;
- (d) And to all matters relating to the foregoing.

DATED AT St. John's, in the Province of Newfoundland and Labrador this 12th day of September, 2017.

Per:



Consumer Advocate

Terrace on the Square, Level 2, P.O. Box 23135
St. John's, Newfoundland & Labrador A1B 4J9

Telephone: (709) 724-3800

Telecopier: (709) 754-3800

**Board of Commissioners of Public Utilities
Newfoundland and Labrador**

Intervenor Submission Form

All information provided on this form will be placed on the public record for this proceeding

Proceeding

In the matter of a General Rate Application filed by Newfoundland and Labrador Hydro on July 28, 2017

Intervenor Information

Name: Dennis Browne, Q.C.	Mailing Address: P.O. Box 23135, Terrace on the Square, Level 2
Title: Consumer Advocate	City: St. John's
Organization: Consumer Advocate	Province: NL
Telephone: 709-724-3800	Postal Code: A1B 4J9
Facsimile: 709-754-3800	Email: dbrowne@bfma-law.com
Address for delivery (if different from mailing address):	

Legal Counsel / Representative (if applicable)

Name: Stephen Fitzgerald	Mailing Address: P.O. Box 23135, Terrace on the Square, Level 2
Title: Counsel	City: St. John's
Organization: Consumer Advocate	Province: NL
Telephone: 709-724-3800	Postal Code: A1B 4J9
Facsimile: 709-754-3800	Email: sfitzgerald@bfma-law.com
Address for delivery (if different from mailing address):	

Interest in the Proceeding

List the topics/issues you are interested in and the proposed disposition.

Appointed as Consumer Advocate under Section 117 of the Act to review the application, to plan the case on behalf of consumers, to work with consultants and to attend to all matters related to the above.

What facts or documentation will you rely on to support your intervention?

To advocate that the Board apply the policy established under the Electrical Power Control Act 1994 (the "Act") and in particular to ensure that the Application will result in power being delivered to consumers at the lowest possible cost consistent with reliable service and to represent consumers in all matters pertaining to the Application.

How is your interest unique and not represented by others?

Appointed as Consumer Advocate under Section 117 of the Act to represent the interests of electricity consumers.

Participation in the Proceeding

Do you intend to:

- | | | | |
|------|--|---|-----------------------------|
| i. | Appear throughout the hearing | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| ii. | Submit written evidence | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| iii. | Ask written questions on the application | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| iv. | File expert reports | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| v. | Call witnesses | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| vi. | Cross examine witnesses | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| vii. | Present final argument | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |

If you intend to call expert witness(es) provide the following information on a separate attachment for each witness: Name of witness, address, qualifications, and subject/issue that will be addressed by the witness

I, _____, agree to respect the rules of the procedure and the dates and deadlines established for this proceeding and I will responsibly represent the interest(s) set out in this form and the parameters established by the Board for my participation.

September 12, 2017

Signature

Date

Completed forms may be submitted by mail, courier, fax or email at the addresses below:

Mail

Board of Commissioners of Public Utilities
P.O. Box 21040
St. John's, NL
Canada, A1A 5B2

Courier/Hand delivered

Board of Commissioners of Public Utilities
120 Torbay Road
Prince Charles Building, Suite E-210
St. John's, NL
A1A 5B2

Facsimile/email

F: 709-726-9604
E: ito@pub.nl.ca