

Intergovernmental Affairs

The Public Utilities Board 400 - 330 Portage

"APPENDIX I"

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INTERVENOR REQUEST FORM

1. Application Re Heat	aring:				
Manitoba Hydro 2015/16	and 2016/17 General Rate Application				
2. Name of Requesti	ng Party:				
Consumers' Association	n of Canada (Manitoba)/Winnipeg Harvest				
3. Address of Reque	sting Party:				
c/o Public Interest Law	Centre of Legal Aid Manitoba, 200 – 393 Port	age Avenue, Winnipeg, MB R3B 3H6			
4. Phone Number:	Business:	Residence			
	204.985.8533 or 204.985.8540 (general				
	office) Fax Number:	E-mail:			
	204.985.8544				
E Contact Derech(a)		bywil@pilc.mb.ca and sukno@pilc.mb.ca			
5. Contact Person(s)					
Byron Williams 6. Address:					
Same as above	Ducinopau	Decidence			
7. Phone Number:	Business:	Residence:			
	Fax Number:	E-mail:			
8. State reasons for t	the proposed intervention (please be sp	ecific).			
Please see Attachment	A.				

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a) Do you intend Yes No (i) to appear throughout the hearing: X (ii) to participate in the production of evidence: X (iii) to participate in the testing of evidence: X (iii) to participate in the testing of evidence: X (iv) to present final argument: X b) Do you intend to call witnesses: Yes (i) Name: La Capra Associates (ii) Address: One Washington Mall, 9th Floor Boston, MA 02108 (iii) Qualifications: Modern capital asset planning and prioritization. (iv) Subject of submission (please note date for filing submission):	9. State nature	of proposed interver	ntion.			
(i) to appear throughout the hearing: X (ii) to participate in the production of evidence: X (iii) to participate in the testing of evidence: X (iv) to present final argument: X (i) Name: La Capra Associates (ii) Address: One Washington Mall, 9th Floor Boston, MA 02108 Boston, MA 02108 See Attachment A. (iv) Subject of submission (please note date for filing submission): See Attachment A. 10. Will you be applying for costs under Board Order No. 163/87: Yes Not X If yes: Refer to Section 41 of Rules of Practice and Procedure. Provide detailed budget as per the at		- 1 1				
(i) to applying for costs under Board Order No. 163/87: Yes No (ii) to participate in the production of evidence: X X (iii) to participate in the testing of evidence: X X (iv) to present final argument: X X b) Do you intend to call witnesses: Yes No (i) Name: La Capra Associates X (ii) Address: One Washington Mall, 9th Floor Seston, MA 02108 (iii) Qualifications: Modern capital asset planning and prioritization. X (iv) Subject of submission (please note date for filing submission): X	a) Do you intend				No	
(ii) 10 participate in the production of order not. (iii) to participate in the testing of evidence: X (iv) to present final argument: X (iv) to present final argument: X b) Do you intend to call witnesses: Yes (i) Name: La Capra Associates (ii) Address: One Washington Mall, 9th Floor Boston, MA 02108 Modern capital asset planning and prioritization. (iii) Qualifications: Modern capital asset planning and prioritization. (iv) Subject of submission (please note date for filing submission): See Attachment A. 10. Will you be applying for costs under Board Order No. 163/87: Yes Yes: Refer to Section 41 of Rules of Practice and Procedure. Provide detailed budget as per the attached Appendix II. Yes	(i)	to appear througho	ut the hearing:	X		
(iv) to present final argument: X (iv) to present final argument: X b) Do you intend to call witnesses: Yes No (i) Name: La Capra Associates X (ii) Address: One Washington Mall, 9th Floor Boston, MA 02108 X (iii) Qualifications: Modern capital asset planning and prioritization. X (iv) Subject of submission (please note date for filing submission): X See Attachment A. 10. Will you be applying for costs under Board Order No. 163/87: Yes No If yes: Refer to Section 41 of Rules of Practice and Procedure. Provide detailed budget as per the attached Appendix II. Yes	(ii)	to participate in the	production of evidence:	X		
(ii) No (ii) Name: (ii) Address: (iii) Address: (iii) Address: (iii) Qualifications: Modern capital asset planning and prioritization. (iv) Subject of submission (please note date for filing submission): See Attachment A. 10. Will you be applying for costs under Board Order No. 163/87: Yes Yes: Refer to Section 41 of Rules of Practice and Procedure. Provide detailed budget as per the attached Appendix II.	(iii)	to participate in the	testing of evidence:	X		
x x c) If yes to No. 9b), please provide witness': Continued below	(iv)	to present final arg	ument:	X		
x x c) If yes to No. 9b), please provide witness': Continued below						
c) If yes to No. 9b), please provide witness': Continued below (i) Name: La Capra Associates (ii) Address: One Washington Mall, 9th Floor Boston, MA 02108 (iii) Qualifications: Modern capital asset planning and prioritization. (iv) Subject of submission (please note date for filing submission): See Attachment A. 10. Will you be applying for costs under Board Order No. 163/87: Yes Ne If yes: Refer to Section 41 of Rules of Practice and Procedure. Provide detailed budget as per the attached Appendix II.	b) Do you	intend to call witnes	ses:		No	
(i) Name: La Capra Associates (ii) Address: One Washington Mall, 9th Floor Boston, MA 02108 (iii) Qualifications: Modern capital asset planning and prioritization. (iv) Subject of submission (please note date for filing submission): See Attachment A. 10. Will you be applying for costs under Board Order No. 163/87: Yes Yes: Nefer to Section 41 of Rules of Practice and Procedure. Provide detailed budget as per the attached Appendix II.				X		
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(ii) Address: One Washington Mall, 9th Floor Boston, MA 02108 (iii) Qualifications: Modern capital asset planning and prioritization. (iv) Subject of submission (please note date for filing submission): See Attachment A. 10. Will you be applying for costs under Board Order No. 163/87: Yes Yes: Note: The attached Appendix II.	c) If yes to	o No. 9b), please pro	vide witness': Continued below			
Boston, MA 02108 (iii) Qualifications: Modern capital asset planning and prioritization. (iv) Subject of submission (please note date for filing submission): See Attachment A. 10. Will you be applying for costs under Board Order No. 163/87: Yes Yes: Yes If yes: Refer to Section 41 of Rules of Practice and Procedure. Provide detailed budget as per the attached Appendix II.	(i)	Name:	La Capra Associates			
(iv) Subject of submission (please note date for filing submission): See Attachment A. 10. Will you be applying for costs under Board Order No. 163/87: Yes No If yes: Refer to Section 41 of Rules of Practice and Procedure. Provide detailed budget as per the attached Appendix II.	(ii)					
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10. Will you be applying for costs under Board Order No. 163/87: Yes No 10. Will you be applying for costs under Board Order No. 163/87: Yes No 10. Will you be applying for costs under Board Order No. 163/87: Yes No 10. Will you be applying for costs under Board Order No. 163/87: Yes No 10. Will you be applying for costs under Board Order No. 163/87: Yes No 10. Will you be applying for costs under Board Order No. 163/87: Yes No 10. Will you be applying for costs under Board Order No. 163/87: Yes No 11. Will you be applying for costs under Board Order No. 163/87: Yes No 11. Will you be applying for costs under Board Order No. 163/87: Yes No 12. Will you be applying for costs under Board Order No. 163/87: Yes No 13. Will you be applying for costs under Board Order No. 163/87: Yes No 14. Will you be applying for costs under Board Order No. 163/87: Yes No 15. Will you be applying for costs under Board Order No. 163/87: Yes No 16. Will you be applying for costs under Board Order No. 163/87: Yes No 16. Will you be applying for costs under Board Order No. 163/87: Yes No	(iv)	Subject of submis	ssion (please note date for filing submission):			
If yes: Refer to Section 41 of Rules of Practice and Procedure. Provide detailed budget as per the attached Appendix II.	See Attachment A.					
Provide detailed budget as per the attached Appendix II.	x					
11. Comments and other information:						
	11. Comments a	and other information	1:			

Witnesses continued:

Mr. John McCormick J. D. McCormick Financial Services, Inc. 1014 Hillcrest Avenue, S.W. Calgary, Alberta T2T 0Z2 Finance including interest rate forecasting and debt management risk.

Laurence Booth CIT Chair in Structured Finance Professor of Finance University of Toronto 563 Spadina Crescent Toronto, Ontario M5S 2J7 Corporate finance and the behaviour of regulated industries including financial targets.

Community panel, names to be determined.

See Attachment A.



Intergovernmental Affairs

The Public Utilities Board 400 - 330 Portage

"APPENDIX II"

INTERVENER BUDGET AND COST SUMMARY SHEET

To be used to prepare a budget for the Intervener Request Form, Item 10, and to make a claim for an Award of Costs.

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Prepared by:			Date:			
Byron Williams	Byron Williams					
Hearing:	Hearing:					
Manitoba Hydro 2015/16 and 2016/17 General Rate Application						
Period Covered:						
February, 2015 – June	e, 2015					
Intervener's Name	:					
CAC/Winnipeg Ha	rvest					
Contact Person or	Contact Person or Persons:					
Byron Williams						
Address:						
200 – 393 Portage Avenue, Winnipeg, MB R3B 3H6						
Phone Number:	Business:	Residenc	e:			
	204.985.8533 or 204.985.8540					
	Fax Number:	E-mail:				
	204.985.8544	bywil@pilc. sukno@pilc				

See Costs on Page 2.

FEES – to be completed for legal counsel or experts

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Please see Attachment B

				COSTS
PREPARATION:	Hours	Days	Rate	
APPEARANCE:	Hours	Days	Rate	
ARGUMENT & REPLY	Hours	Days	Rate	
FEES TOTAL	Hours	Days		

DISBURSEMENTS

					COSTS
TRAVEL (AUTO)	Miles		Rates		
TRAVEL (OTHER)					
ACCOMMODATION	Nights		Rates		
MEALS	Number				
MISCELLANEOUS	Taxis Teler		hone	Supplies	
DISBURSEMENTS TOTAL					

TOTAL FEES AND DISBURSEMENTS

NOTE: Receipts must be attached for all disbursements.