



---

---

**Dispute Resolution Form for Written Reply  
Submissions for Arbitration**

---

---

This form is intended to be used to file written reply submissions and other materials to the extent that the submissions and other materials of another party raise new facts and/or issues that could therefore not have been addressed in the earlier submissions or materials filed by the replying party.

Submit this form and all attachments by registered mail, fax or courier to the following addresses:

Arbitrator

[Address for service of the Arbitrator as published by the IESO]

[Party Name] \_\_\_\_\_

[Street Address] \_\_\_\_\_

[City, Province] \_\_\_\_\_

[Postal Code] \_\_\_\_\_

[Fax Number] \_\_\_\_\_

Applicant(s)/Respondent(s)

[Party Name] \_\_\_\_\_

[Street Address] \_\_\_\_\_

[City, Province] \_\_\_\_\_

[Postal Code] \_\_\_\_\_

[Fax Number] \_\_\_\_\_

All information submitted will be assigned the appropriate confidentiality level upon receipt.

**PART 1 – GENERAL INFORMATION ABOUT THE APPLICANT/RESPONDENT**

These are the written submissions and other materials of:

an Applicant

a Respondent (Applicant by counterclaim or cross claim)

Organization Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ Province/State: \_\_\_\_\_

Postal/Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_

**PART 1 – GENERAL INFORMATION ABOUT THE APPLICANT/RESPONDENT (CONTINUED)**

<b>Main Contact</b>	
Name: _____	Title: _____
Telephone No.: _____	E-mail Address: _____
Fax Number: _____	Dispute Number: _____
Market Participant/Metering Service Provider No.: _____	IESO Help Centre (IHC) Ticket No. (if available): _____
<b>Alternate Contact (if any)</b>	
Name: _____	Title: _____
Telephone No.: _____	E-mail Address: _____
Fax Number: _____	

**PART 2 – REPRESENTATION**

Represented by:
<input type="checkbox"/> Legal Counsel
<input type="checkbox"/> Other (please specify)
Name: _____
Address: _____

**PART 3 – SUBMISSIONS ON ISSUES IN DISPUTE, WITNESS NAMES AND STATEMENTS, LIST OF DOCUMENTS**

Please provide a written statement containing your reply submission on each issue in dispute to the extent not previously addressed in earlier submissions or materials.

**PART 4 – LIST OF DOCUMENTS**

Please provide a list of documents to be filed at the arbitration hearing in support of these reply submissions, to the extent not previously identified in earlier submissions or materials:

- 1.
- 2.
- 3.
- 4.
- 5.

For additional submissions, please include on a separate sheet.  
Please attach all documents listed above.

**PART 5 – LIST OF WITNESSES**

Please provide a list of witnesses intended to be called at the arbitration hearing in support of these reply submissions, together with a concise written summary of the anticipated evidence of each witness, to the extent not previously identified in earlier submissions or materials:

Witness Name: \_\_\_\_\_

Concise Summary:

Witness Name: \_\_\_\_\_

Concise Summary:

Witness Name: \_\_\_\_\_

Concise Summary:

**PART 5 – LIST OF WITNESSES (CONTINUED)**

Witness Name: _____
Concise Summary:
Witness Name: _____
Concise Summary:
Witness Name: _____
Concise Summary:

For additional witnesses, please include on a separate page.

**PART 6 – DECLARATION**

<p>The undersigned, a duly authorized representative of the party submitting these written submissions and other materials, hereby declares that the information contained in and submitted in support of this documentation is, to the best of the party's knowledge, complete and accurate.</p> <p>Dated at the City of _____, Province/State _____ this _____ day of _____, _____.</p> <p>Signature: _____</p> <p>Name: _____</p> <p>Title: _____</p>
--