



900 N 9th Street – Suite 628
Philadelphia, PA 19123
609-217-3407
ABakey@docbakey.com

Docket No A-2023-3042056
Utility Code: 1226424

September 26, 2023

PA PUC Secretary
400 North Street
Harrisburg, PA 17120

Subject: Missing Information for Natural Gas Application

Dear Secretary:

I am providing information that was either missing/incomplete for my Natural Gas Supplier License Application.

- 1) Section 2.a. – Corrected Form Attached
 - a. Applicant will be using Fictitious Name “dba” Andrew Bakey d/b/a Bakey Energy Consulting.
- 2) Section 7.e. – Corrected Form Attached
 - a. Email address – abakey@docbakey.com
- 3) Section 4 A – Explanation of Natural Gas Services

I am currently acting as an energy consultant for natural gas services where my fees are getting paid directly to me on an hourly basis by my client. In the future, my client has asked that I place my gas consulting fee in the natural gas supplier price. Thus, this is the reason for my request for a natural gas broker marketing license.

Thank you for considering my firm as an applicant for natural gas brokering services.

Sincerely,

A handwritten signature in black ink that reads "ABakey". The signature is stylized and cursive.

Andrew Bakey, PE
President
(609) 217-3407

Corrected form 9/26/23

2. BUSINESS ENTITY FILINGS AND REGISTRATION

a. **FICTITIOUS NAME:** *(Select appropriate statement and provide supporting documentation as listed.)*

The Applicant will be using a fictitious name or doing business as ("d/b/a")

Provide a copy of the Applicant's filing with Pennsylvania's Department of State Pursuant to 54 Pa. C.S. §311.

Or

The Applicant will not be using a fictitious name.

b. **BUSINESS ENTITY AND DEPARTMENT OF STATE FILINGS:**

(Select appropriate statement and provide supporting documentation. As well, understand that Domestic means being formed within Pennsylvania and foreign means being formed outside Pennsylvania.)

The Applicant is a sole proprietor.

- If the Applicant is located outside the Commonwealth, provide proof of compliance with 15 Pa. C.S. §4124 relating to Department of State filing requirements.

Or

The Applicant is a:

- domestic general partnership (*)
- domestic limited partnership (15 Pa. C.S. §8511)
- foreign general or limited partnership (15 Pa. C.S. §4124)
- domestic limited liability partnership (15 Pa. C.S. §8201)
- foreign limited liability general partnership (15 Pa. C.S. §8211)
- foreign limited liability limited partnership (15 Pa. C.S. §8211)


- Provide proof of compliance with appropriate Department of State filing requirements as indicated above.
- Give name, d/b/a, and address of partners. If any partner is not an individual, identify the business nature of the partner entity and identify its partners or officers.
- Provide the state in which the business is organized/formed and provide a copy of the Applicant's charter documentation.
- * If a corporate partner in the Applicant's domestic partnership is not domiciled in Pennsylvania, attach a copy of the Applicant's Department of State filing pursuant to 15 Pa. C.S. §4124.

or

SOLE PROPRIETORSHIP - FICTITIOUS NAME FILING PA

Entity#: 7596596
 Date Filed: 09/01/2022
 Pennsylvania Department of State

PENNSYLVANIA DEPARTMENT OF STATE BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

<input type="checkbox"/> Return documents by mail to: Andrew Babey Name 103 Brookside Way, Address Middle Hill NJ 08062 City State Zip Code <input type="checkbox"/> Return document by email to: _____	Registration of Fictitious Name DSCB-54-311 (rev. 2/2017)  311
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Read all instructions prior to completing. This form may be submitted online at <https://www.corporations.pa.gov/>.

Fee: \$70.00

I qualify for a veteran/active-or-armed small business fee exemption (see 54 Pa.C.S. 311.03)

In compliance with the requirements of 54 Pa.C.S. § 311 (relating to registration), the undersigned entity (ies) desiring to register a fictitious name under 54 Pa.C.S. Ch. 3 (relating to fictitious names), hereby state(s) that:

- The fictitious name is:
Bakey Energy Consulting
- A brief statement of the character or nature of the business or other activity to be carried on under or through the fictitious name is:
Energy Consulting for commercial and industrial customers. Consulting includes electricity and natural gas procurement, energy auditing, sales tax audits and solar/battery storage feasibility studies.
- The address, including number and street, if any, of the principal place of business (P.O. Box alone is not acceptable):

200 N 16th Street, Suite 2112	Philadelphia	PA	19102	Philadelphia
Number and street	City	State	Zip	County
- The name and address, including number and street, if any, of each individual interested in the business is:

Name	Number and Street	City	State	Zip
Andrew Babey	200 N 16th Street, Suite 2112	Philadelphia	Philadelphia	PA, United States, 19102

5. Each entity, other than an individual, interested in such business is (are):

Name	Form of Organization	Organizing Jurisdiction
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Principal Office Address

PA Registered Office, if any

6. The applicant is familiar with the provisions of 54 Pa.C.S. § 332 (relating to effect of registration) and understands that filing under the Fictitious Names Act does not create any exclusive or other right in the fictitious name.

7. (Optional): The name(s) of the agent(s), if any, any one of whom is authorized to execute amendments to, withdrawals from or cancellation of this registration in behalf of all then existing parties to the registration, is (are):

IN TESTIMONY WHEREOF, the undersigned has caused this Application for Registration of Fictitious Name to be executed this

1st day of September, 2022.

Andrew Baker

Individual Signature



Corrected Form 9/26/23

- e. **ACCOUNTING RECORDS CUSTODIAN:** Provide the name, title, address, telephone number, FAX number, and e-mail address of Applicant's custodian for its accounting records.

ANDREW BAKLEY, PE
PRESIDENT
900 N 9th ST - APT 628
PHILA, PA 19123

(609) 217-3407
NO FAX #
abakley@docbakley.com

- f. **TAXATION:** Complete the TAX CERTIFICATION STATEMENT attached as Appendix D to this application.

All sections of the Tax Certification Statement must be completed. Absence (submitting N/A) of any of the TAX identifications numbers (items 7A through 7C) shall be accompanied by supporting documentation or an explanation validating the absence of such information.

Items 7A and 7C on the Tax Certification Statement are designated by the Pennsylvania Department of Revenue. Item 7B on the Tax Certification Statement is designated by the Internal Revenue Service.

8. TECHNICAL FITNESS:

To ensure that the present quality and availability of service provided by natural gas distribution companies does not deteriorate, the Applicant shall provide sufficient information to demonstrate technical fitness commensurate with the service proposed to be provided.

- a. **EXPERIENCE, PLAN, STRUCTURE:** such information may include:

- Applicant's previous experience in the natural gas industry.
- Summary and proof of licenses as a supplier of natural gas services in other states or jurisdictions.
- Type of customers and number of customers Applicant currently serves in other jurisdictions.
- Staffing structure and numbers as well as employee training commitments.
- Business plans for operations within the Commonwealth.
- Any other information appropriate to ensure the technical capabilities of the Applicant.

- b. **PROPOSED MARKETING METHOD** (check all that apply)

- Internal – Applicant will use its own internal resources/employees for marketing
- External NGS – Applicant will contract with a **PUC LICENSED NGS**
- Affiliate – Applicant will use a **NON-NGS affiliate that is a nontraditional marketer and/or marketing services consultant**
- External Third-Party – Applicant will contract with a **NON-NGS third party nontraditional marketer and/or non-selling marketer**
- Other (Describe):