

Control Number: 43413



Item Number: 1

Addendum StartPage: 0



Public Utility Commission of Texas

1701 N. Congress Avenue or P.O. Box 13326

Austin, Texas 78711-3326

512-936-7000 • (Fax) 512-936-7003

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PUBLIC UTILITY COMMISSION
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Application for, or Amendment to, a Retail Electric Provider (REP) Certificate
(Pursuant to PUC Substantive Rule §25.107)

DOCKET NUMBER: 43413

Applicant
Applicant Name: J.P. Morgan Ventures Energy Corporation
Second Applicant Name (if required):
Type of Certification
(a) Check only one of the following.
<input type="checkbox"/> New REP Option 1 Certification
<input type="checkbox"/> New REP Option 2 Certification
<input type="checkbox"/> New REP Option 3 Certification
<input checked="" type="checkbox"/> REP Amendment [REP Certification No.:] 10193
(b) If you are filing an amendment, check one or more of the following amendment categories requested in this filing: (Provide a written explanation of the Amendment in "c" below).
<input type="checkbox"/> Name Change amendment
<input type="checkbox"/> Change in Ownership/Control
<input type="checkbox"/> Change in Service Area
<input type="checkbox"/> Change in Type of Provider
<input type="checkbox"/> Relinquishment of Certification
<input type="checkbox"/> Corporate Restructuring
<input type="checkbox"/> Change in Technical/Managerial Qualifications
<input type="checkbox"/> Change in Financial Qualifications
<input checked="" type="checkbox"/> Other (Explain in "c" below)
(c) Provide an explanation of the Amendment:
Add a customer, update contact information.

PART A – COMPANY ADMINISTRATIVE INFORMATION

A-1. Application Contact Information

Contact Name: Jason Lewis		Title: Assistant General Counsel	
Street or Mailing address: 277 Park Avenue			
Mailing address (Suite, Floor or Room): 13th Floor			
City: New York		State: NY	Zip Code: 10172
Phone No.: (212) 648-0762		Fax No.: (866) 375-7813	Toll Free No.:
Email: jason.lewis@jpmorgan.com		Web Address: www.jpmorgan.com	

A-2. Authorized Representative Contact Information

Contact Name: Trent Carlson		Title: Vice President, Compliance Manager	
Street or Mailing address: 1111 Fannin Street			
Mailing address (Suite, Floor or Room): 11th Floor			
City: Houston		State: TX	Zip Code: 77002
Phone No.: (713) 236-3000		Fax No.: (713) 236-5000	Toll Free No.:
Email: trent.a.carlson@jpmorgan.com		Web Address: www.jpmorgan.com	

A-3. Regulatory Representative Contact Information

Contact Name: Trent Carlson		Title: Vice President, Compliance Manager	
Street or Mailing address: 1111 Fannin Street			
Mailing address (Suite, Floor or Room): 11th Floor			
City: Houston		State: TX	Zip Code: 77002
Phone: (713) 236-3000		Fax No.: (713) 236-5000	Toll Free No.:
Email: trent.a.carlson@jpmorgan.com		Web Address: www.jpmorgan.com	

A-4. Complaint Representative Contact Information

Contact Name: Trent Carlson		Title: Vice President, Compliance Manager	
Street or Mailing address: 1111 Fannin Street			
Mailing address (Suite, Floor or Room): 11th Floor			
City: Houston		State: TX	Zip Code: 77002
Phone No.: (713) 236-3000		Fax No.: (713) 236-5000	Toll Free No.:
Email: trent.a.carlson@jpmorgan.com		Web Address: www.jpmorgan.com	

A-5. Emergency Contact Information – The Applicant shall provide the following information concerning its 9-1-1 Contact Personnel as required in Substantive Rule §25.53(c). You may provide up to three 9-1-1 contacts per company. The Commission prefers that you provide at least two 9-1-1 Contacts.

PRIMARY CONTACT: Trent Carlson		TITLE: Vice President, Compliance Manager	
Office No: (713) 236-3053	Fax No: (713) 236-5000	Toll Free No:	
Cell No:	Home No:		
EMAIL: trent.a.carlson@jpmorgan.com	WEBSITE: www.jpmorgan.com		
SECONDARY CONTACT: John Nelson		TITLE: Executive Director	
Office No: (713) 236-4120	Fax No: (713) 236-5000	Toll Free No:	
Cell No:	Home No:		
EMAIL: john.r.nelson@jpmorgan.com	WEBSITE: www.jpmorgan.com		
TERTIARY CONTACT:		TITLE:	
Office No:	Fax No:	Toll Free No:	
Cell No:	Home No:		
EMAIL:	WEBSITE:		
A-6. Principal Company Information			
(a). Physical Address			
Company Name: J.P. Morgan Ventures Energy Corporation			
Primary Contact: Jason Lewis		Title: Assistant General Counsel	
Physical Address: 277 Park Avenue, 13th Floor			
City: New York		State: NY	ZIP: 10172
Email: jason.lewis@jpmorgan.com		Website: www.jpmorgan.com	
Phone: (212) 648-0762		Fax: (866) 375-7813	Toll Free:
(b). Mailing Address (if different from Physical Address)			
Company Name:			
Contact:		Title:	
Mailing Address:			
City:		State:	ZIP:
Email:		Website:	
(c). Texas Office Address			
Company Name: JP Morgan Ventures Energy Corporation			

Contact: Trent Carlson		Title: Vice President, Compliance Manager	
Address: 1111 Fannin Street, 11th Floor			
City: Houston		State: TX	ZIP: 77002
Email: trent.a.carlson@jpmorgan.com		Website: www.jpmorgan.com	
Phone: (713) 236-3000	Fax: (713) 236-5000		Toll Free:

A-7. Directors, Officers, or Principals Information – (Provide a list of the names, titles, phone number and office email)

Name:	Title:	Phone:	Email:
Name:	Title:	Phone:	Email:
Name:	Title:	Phone:	Email:
Name:	Title:	Phone:	Email:
Name:	Title:	Phone:	Email:

A-8. Certificated Name(s)

(a). Primary Name on Certificate

Primary Certificate Name:

Texas Secretary of State (or County) File Number:

Date and State where Business was established:

Texas Comptroller's Tax ID. Number:

Other Applicable Certification/File Numbers:

(b). EXISTING Approved Certificate Names (if applicable)(Maximum of 5 d/b/as)

PUC Approved Name:

PUC Approved Name:

PUC Approved Name:

PUC Approved Name:

PUC Approved Name:

(c). REQUESTED Certificate Names (if applicable)(Maximum of 5 d/b/as)

Name:	Texas SoS File No.	Date Active:
Name:	Texas SoS File No.	Date Active:
Name:	Texas SoS File No.	Date Active:

Name:	Texas SoS File No.	Date Active:
Name:	Texas SoS File No.	Date Active:
(d). DELETION of EXISTING Certificate Names (if applicable)		
Name to be DELETED:		
Name to be DELETED:		
Name to be DELETED:		
Name to be DELETED:		
Name to be DELETED:		

PART B – SERVICE AREA

B-1. Certificated Service Area

(a). Option 1 REP – Service Area by Geography (Select Only One)

- Entire State of Texas
- By Service Area of one or more Transmission and Distribution Utilities (TDUs), Municipal Utilities, or Electric Cooperatives (Identify each requested utility and cooperative):
- Geographic Area of one or more Independent Organization within Texas (e.g. ERCOT) (Identify each organization):
- Specific Geographic Area. (Identify on Attachment B-1 the Zip Codes defining the requested service area.):

(b). Option 2 REP – Service Area by Customer (Select Only One)

- Provide as Attachment B-2 the affidavit from each customer required by §25.109(d)(2). (Identify the customer): **Southern Methodist University**

(c). Option 3 REP – Service Area by Customer (Select Only One)

- Provide as Attachment B-3 the affidavit which states that the Applicant is in compliance with §25.107(d)(3), §25.109, §25.211, and §25.212 (Registration of PGC, Registration of Distributed Generation, and compliance with National electric safety code and local building codes.) (Identify the entities involved): **Southern Methodist University**

PART C – FINANCIAL REQUIREMENTS

C-1. Access to Capital – An Applicant must choose one of the three methods below to demonstrate that the Applicant meets the capital requirements stated in §25.107(f)(1)

- Investment Grade Credit Rating.** If the Applicant elects to meet the requirements of §25.107(f)(1)(A)(i), provide as Attachment C-1 the documentation required by §25.107(f)(4)(A)

State of: Texas §

§

County of: Harris §

My name is Trent Carlson. I am the Vice President of the Applicant.

I swear or affirm that I have personal knowledge of the facts stated in this Application for a Retail Electric Provider Certificate that I am competent to testify to them, and that I have the authority to make this Application on behalf of the Applicant. I further swear or affirm that all of the statements and representations made in this Application for a Retail Electric Provider Certificate are true and correct. I swear or affirm that the Applicant understands and will comply with all requirements applicable to a Retail Electric Provider.

Trent A. Carlson
Signature Title

TRENT A. CARLSON
Typed or Printed Name

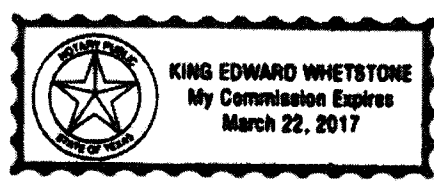
Vice President, Regulatory/Compliance
Title of Signatory

SWORN TO AND SUBSCRIBED before me on the 29th, September 2014

King E. Whetstone

Notary Public in and For the State of TEXAS

My commission expires on: 3-22-2017



ATTACHMENT D
FORM OF AFFIDAVIT

OPTION II REP CUSTOMER AFFIDAVIT

State of: §

§

County of: §

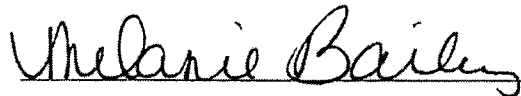
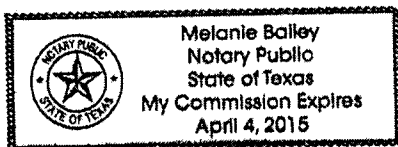
My name is R. Gerald Turner. I am the President of Southern Methodist University.

1. I swear or affirm that I have personal knowledge of the facts stated in this affidavit, that I am competent to testify to those facts, and that all of the statements and representations made in this affidavit are true and correct.
2. I swear or affirm that I have the authority to provide this affidavit on behalf of Southern Methodist University ("SMU").
3. SMU has contracted with J.P. Morgan Ventures Energy Corporation (REP Certificate No. 10193) ("Applicant") for the provision of one megawatt or more of capacity.
4. Applicant is not SMU's REP of Record. A different company is SMU's REP of Record and, pursuant to the agreement between Applicant and SMU, is responsible for accepting the power scheduled by Applicant for delivery to SMU.
5. SMU is satisfied that Applicant understands and will comply with all requirements applicable to an Option II Retail Electric Provider.
6. SMU is satisfied that the Applicant meets the standards prescribed by § 39.352(b)(1)-(3) and (c) of the Public Utility Regulatory Act.



Signature: R. Gerald Turner
President

SWORN TO AND SUBSCRIBED before me on the 29th of September.



Notary Public in and For the State of Texas.

My commission expires on: 4-4-15