

Identification and attestation

Date: _____ Company name (if applicable): _____
Name: _____ Position: _____
Phone number: _____ Email: _____

I, acting in my position as set out above, have personally reviewed all of the information included and referenced in this application and affirm that, to the best of my knowledge, the following:

- All costs claimed are as a result of participation in Proceeding # _____
- All information is correctly stated and reflects the existing records of the company.
- The costs claimed are reasonable, accord with the scale of costs and all other requirements of Rule 009, and were directly and necessarily related to participation in the original proceeding.
- The accounts of the participant's lawyer(s), consultant(s) and witness(es) are accurate and represent work performed (and disbursements incurred) at the specific request of the costs applicant.
- The information in the cost application is complete and consistent with the Commission's requirements and is not false or misleading in all material respects.

Yes No

I acknowledge that this document and all supporting documents will be placed on the public record and will be accessible on the AUC's eFiling System: Yes No

Part A: Original proceeding information, type of participation and eligibility

Costs for participation in Proceeding #: _____

Proceeding title from eFiling System: _____

Type of participation: Local intervener Other participant

Local intervener: _____ Name of group (if applicable): _____

Representation: _____ Name of representative (if applicable): _____

Standing or right to participate granted in Exhibit #: _____

Total budget amount: \$ _____ in Exhibit #: _____

Advance funding amount awarded: \$ _____ in AUC ruling, Exhibit #: _____

Part B: Participation details

Please briefly summarize the expertise you brought and how that expertise assisted the Commission in determining the issues raised in the proceeding:

Did your participation include the following? Please check all applicable process steps:

Forming a group:	Yes	No
Information requests:	Yes	No
Responses to information requests:	Yes	No
Written evidence:	Yes	No
Oral evidence:	Yes	No
Cross examination:	Yes	No
Argument/Reply argument:	Yes	No

Other (e.g., rebuttal evidence), please specify:

Part C: Costs claimed

Please complete the linked [Rule 009 Local Intervener Costs Spreadsheet](#) template.

Please fill in the following fields from the template:

Participant total costs claimed (cell H15)

Advance funding amount (cell H16)

Net claimed (cell H17)

Part D: Compliance with Rule 009

Scale of costs

Are any costs claimed in excess of the scale of costs? Yes No

If yes, explain why recovery in excess of the scale is reasonable and warranted in the circumstances:

Avoidance of duplication

Describe the efforts made to form a group or otherwise avoid duplication between participants in the original proceeding:

Were efforts made to use junior or less costly personnel? Yes No

Describe the efforts made to avoid duplication between your counsel, experts and consultants:

Part E: Supporting documentation

Please submit this completed **Rule 009 Costs Application Form** and your **Rule 009 Local Intervener Costs Spreadsheet** as a **new application** in the [AUC's eFiling System](#).

Please also submit the following supporting documentation:

- Statements of account/invoices/timesheets for fees claimed.
- Receipts for accommodation and airfare (if any). Please note, receipts for all other disbursements will be required to be submitted if your costs claim is selected for a more detailed review.

Supporting and instructional documents for the eFiling System are available on the [AUC website](#).