

## 400 Sheldon Drive, Unit 1 Cambridge, Ontario, N1T 2H9

Phone: 1-877-ESA-SAFE (372-7233) **≢**=7  $\underline{esa. Cambridge @\, electrical safety. on. ca}$ 

## **Entertainment Industry Notification**

or otherwise. This includes all Television, Film, Cor Failure to comply could result in unsafe working site			uctions inclu	ding but not limited to Live Pro	oductions regardles	s of site or location.	
Date		I confirm that the information provided in this form is true, complete and					
ESA Account #		accurate.					
ECRA/ESA Lic #		•		Signatu	re		
	Me	thod of Paymer	nt				
Charge to ESA Account	Credit Card  FSA account custome	<b>er</b> - please provide tl	he last 4 digi	its of the card saved on file			
ESA account customer - please provide the last 4 digits of the card saved on file  Cheque / Money Order							
Call 1-877-372-7233 to discuss fees; attach the cheque / money order to the completed form and mail to the address noted	One-time / non-account cust security requirements, you must 4:30PM. Your inspection may	st file your notification	n with ESA b	by phone; please call 877-ESA			
Applicant Information - please provide a complete mailing address						PO/Job#	
Name Email_							
Address Unit / Suite							
City Prov/				Country		Date Ready	
Postal Code	Cell Ph Fax						
Location Information							
Name:							
					Unit:		
Note the alternate street name if street is a #d Rec City/Town:			T /D				
City/Town: Twp/Region:  Work location in building:							
Main Intersection:					Water Trave	el Required? Yes	
Work Contact (applicant's representative) - this notification will be returned if a Work Contact name / cell phone or email address are not provided							
First & Last Name							
Complete this section for: Commercial	s / Television / Movie Shoot	ts / Video / Theatr	e Producti	ions / Travelling Shows			
Commercial [C041]   Television [C032]   Movie / Film [C032]   Video [C032]   Theatre [C032]   Travelling Show [C032]							
Production Name: [C032 / Approximate # of Production Name: # of Locations: C041] Production Weeks: [C042]							
Production start date: Production end date:    Production end date:   Best time for   Best tim							
Locations: (If list is longer than space prov	ided, please attach the list)	Site Type  On Location	# of Sets	Contact Name	Contact Phone #	Inspection	
		On Location					
		O In Studio					
		On Location In Studio					
		On Location     In Studio					
Licensed Indicate # of items installed during Production (all locations) [C023]							
						ating & A/C Units	
Shoot Times: AM PM *After 5pm *Weekend							
				Transformers > 1K	ansformers <u>&gt;</u> 1KVA		
Email daily call sheets to Call.Sheets@electricalsafety.on.ca  Complete this section for: Events such as Live Performance / Festival / Trade Show / Carnivals							
· — —	Festival/Special Event [0075]	Trade Show [C059]		Carnival [C030] Other (s	nacify):		
	Todayan opeoidi Event [5079]			` ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '			
Show or Event Name: Number of Locations: AM  What DATE and TIME will the Show be open to the public? What TIME will the Show be ready for Inspection? PM							
What part has been as a constitute of constitute of sources.				What TIME will the Show be ready for Inspection?  Indicate # of items installed for the Event [C023]			
What are the hours of operation for this event?							
Please provide opening and closing times.  Licensed				Generators >12KW Heating & A/C Units			
Electrical Workers Certification of Qualifications? 309 Electrical Electrical Contractor Transformers >= 1KVA						ther:	
Weekend, holiday and evening inspections are subject to additional fees. Rides [C030]						oths [C059] [C030]	
Driving Directions / Comments / Work Details Fee E						Estimate incl HST	
By submitting personal information to the Electrical Safety							
privacy policy, applicable laws or pursuant to our administr have all necessary authority and/or have obtained all neces A copy of our policy is located on our website at www.esas	ssary consents from such individual t						