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Cambridge, ON N1T 2H9

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Fax: 1-800-667-4278

[esa.Cambridge@electricalsafety.on.ca](mailto:esa.Cambridge@electricalsafety.on.ca)

### RESIDENTIAL RENOVATION - Notification & Fee Estimate

Date _____ ESA Account # _____ ECRA/ESA Licence # _____	<input type="checkbox"/> I confirm that the information provided in this form is true, complete and accurate. Name _____ Signature _____	<b>Ready For:</b> <input type="checkbox"/> Will Notify <input type="checkbox"/> *Rough In <input type="checkbox"/> *Service <input type="checkbox"/> *RI & Service <input type="checkbox"/> *Disconnect <input type="checkbox"/> *Trench <input type="checkbox"/> *Grounding <input type="checkbox"/> *Final																																												
<b>Payment Method</b>																																														
<input type="checkbox"/> Charge to ESA Account <input type="checkbox"/> Cheque /Money Order	<b>Credit Card</b> <input type="checkbox"/> ESA account customer - provide the last 4 digits of the card on file _____ <input type="checkbox"/> One-time / non-account customer - must call <b>877-ESA-SAFE (372-7233)</b> , Mon-Fri 7:00AM-4:30PM																																													
<b>Applicant Information - please provide a complete mailing address</b>																																														
Name _____		<b>*Ready Date:</b>																																												
Address _____ Postal Code _____																																														
City _____ Prov/State _____ Country _____		<b>PO/Job #</b>																																												
Phone _____ Email _____																																														
<b>Site Information</b>																																														
Site Name _____																																														
Civic # _____ Street _____ City/Town _____																																														
Phase _____ Block _____ Bldg _____ Sub Div Lot _____ Sub Div Part Lot _____ Floor _____ Unit _____																																														
City/Town _____ Twp/Region _____ Rural Lot _____ Rural Conc _____																																														
Main Intersection _____ Water Travel Required? <input type="checkbox"/> Yes																																														
<b>Work Contact (applicant's representative) - this notification will be returned if a Work Contact name &amp; cell phone or email address are not provided</b>																																														
First & Last Name _____ Cell Ph _____ Email _____																																														
<b>Outlets &amp; Devices (4.2.1)</b>	<b>Equipment (4.4) indicate all that apply &amp; quantities for each (R067)</b>																																													
<b>Indicate the qty of each:</b> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">Receptacles _____</td> <td style="width:33%;">Ceiling Fans _____</td> <td style="width:33%;">Appliance Outlet _____</td> </tr> <tr> <td>Fixtures _____</td> <td>Exhaust Fans _____</td> <td>Dishwasher (LEC) _____</td> </tr> <tr> <td>Switches _____</td> <td>GFCIs _____</td> <td>Rangehood (LEC) _____</td> </tr> <tr> <td>Fire/Security Devices _____</td> <td>AFCIs _____</td> <td>Undercounter Lights _____</td> </tr> <tr> <td>Baseboard Heaters _____</td> <td>Power Outlets _____</td> <td>Plugmold _____</td> </tr> <tr> <td>Yardlights _____</td> <td>Potlights _____</td> <td>Thermostats _____</td> </tr> <tr> <td>Surge Suppressors _____</td> <td>Tracklights _____</td> <td>Breakers Only _____</td> </tr> <tr> <td>Other-describe _____</td> <td>Other-describe _____</td> <td>Other-describe _____</td> </tr> </table> <b>TOTAL</b> _____	Receptacles _____	Ceiling Fans _____	Appliance Outlet _____	Fixtures _____	Exhaust Fans _____	Dishwasher (LEC) _____	Switches _____	GFCIs _____	Rangehood (LEC) _____	Fire/Security Devices _____	AFCIs _____	Undercounter Lights _____	Baseboard Heaters _____	Power Outlets _____	Plugmold _____	Yardlights _____	Potlights _____	Thermostats _____	Surge Suppressors _____	Tracklights _____	Breakers Only _____	Other-describe _____	Other-describe _____	Other-describe _____	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; text-align: center;">Branch Wiring Only</td> <td style="width:50%; text-align: center;">Branch Wiring Only</td> </tr> <tr> <td>A/C _____</td> <td>Heat Trace Cable _____</td> </tr> <tr> <td>Split A/C _____</td> <td>Infloor Heating _____</td> </tr> <tr> <td>Furnace _____</td> <td>Jacuzzi Tub _____</td> </tr> <tr> <td>Heat Pump _____</td> <td>Steam Shower _____</td> </tr> <tr> <td>HRV _____</td> <td>Sauna _____</td> </tr> <tr> <td>Air Handler _____</td> <td>Elevator _____</td> </tr> <tr> <td>Boiler _____</td> <td>Dishwasher (unic) _____</td> </tr> <tr> <td>Water Heater _____</td> <td>Rangehood (unic) _____</td> </tr> <tr> <td>Gas Fireplace _____</td> <td>Submersible Pump _____</td> </tr> </table> Other: _____		Branch Wiring Only	Branch Wiring Only	A/C _____	Heat Trace Cable _____	Split A/C _____	Infloor Heating _____	Furnace _____	Jacuzzi Tub _____	Heat Pump _____	Steam Shower _____	HRV _____	Sauna _____	Air Handler _____	Elevator _____	Boiler _____	Dishwasher (unic) _____	Water Heater _____	Rangehood (unic) _____	Gas Fireplace _____	Submersible Pump _____
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<b>Consumer Service (4.3)</b>	<b>Generators &amp; Transfer Switches</b>																																													
<b>Service</b> _____ Amp   <b>Sub-Panel</b> _____ Amp <input type="checkbox"/> Separate insp? <b>Ganged Meterbase</b> _____ Amp of incoming service # of meters _____ Amp for each meter on the gang <b>Check all that apply:</b> Change Relocate Repair Replace Upgrade <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%;">Conduit Only</td> <td style="width:20%;"></td> <td style="width:20%;"></td> <td style="width:20%;"></td> <td style="width:20%;"></td> </tr> <tr> <td>Main Breaker</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Mast / Stack</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Meterbase</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Panel</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Service</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Grounding _____ Qty</td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	Conduit Only					Main Breaker					Mast / Stack					Meterbase					Panel					Service					Grounding _____ Qty					<b>Generator</b> _____ KW   <b>Transfer Switch</b> _____ Amp Inspected separately? <input type="checkbox"/> Combination Meterbase only _____ Amp _____ KW Combination Panel only _____ Amp _____ KW Pole Top Switch _____ Amp										
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<b>Overhead/Underground Lines (5.4.2, 5.2.5, 5.2.6, 5.4.1)</b>	<b>Pools &amp; Hot Tubs (4.5)</b>																																													
Secondary Trench (C050) _____ Qty Separate inspection? <input type="checkbox"/> Central Metering Service(C051) _____ Amps Permanent Pole Service(C048) _____ Amps Overhead Poleline (C044) _____ # of poles	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">Pools Indoor _____</td> <td style="width:33%;">Inground _____</td> <td style="width:33%;">Above Ground _____</td> <td style="width:33%;">Splashpad _____</td> </tr> <tr> <td>Hard-wired Hot Tub _____</td> <td>Receptacle only for Hot Tub _____</td> <td></td> <td></td> </tr> <tr> <td>Bonding only _____</td> <td>Receptacle only for Pool _____</td> <td></td> <td></td> </tr> <tr> <td>Equipment only _____</td> <td>Branch Wiring only for Equip _____</td> <td></td> <td></td> </tr> <tr> <td>Pool House or Shed _____</td> <td># of devices _____</td> <td>Separate shed inspection? <input type="checkbox"/></td> <td></td> </tr> </table>		Pools Indoor _____	Inground _____	Above Ground _____	Splashpad _____	Hard-wired Hot Tub _____	Receptacle only for Hot Tub _____			Bonding only _____	Receptacle only for Pool _____			Equipment only _____	Branch Wiring only for Equip _____			Pool House or Shed _____	# of devices _____	Separate shed inspection? <input type="checkbox"/>																									
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<b>Work Locations / Comments / Driving Directions</b>																																														

By submitting personal information to the Electrical Safety Authority, or its agents and service providers, you agree that ESA may collect, use and disclose such personal information in accordance with its privacy policy, applicable laws or pursuant to our administrative agreement with the Province of Ontario. If you provide us with the personal information on behalf of another individual, you represent that you have all necessary authority and/or have obtained all necessary consents from such individual to enable us to collect, use and disclose such personal information for the purposes set forth in our Privacy Policy. A copy of our policy is located on our website at [www.esasafe.com](http://www.esasafe.com)