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Cambridge, Ontario, N1T 2H9

Phone: 1-877-ESA-SAFE (372-7233)

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Wiring of Signs & Outline Lighting Installations

Includes Skeletal Neon Lighting, and Signs with Remote Transformer or Ballasts
Electricity Act, 1998, OESC, O. Reg.164/99 as amended, Rule 2-004

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: _____	Ready for: <input type="checkbox"/> Will Notify <input type="checkbox"/> *Rough In <input type="checkbox"/> *Trench <input type="checkbox"/> *Final			
Payment Method					
<input type="checkbox"/> Charge to ESA Account <input type="checkbox"/> Cheque / Money Order	Credit Card <input type="checkbox"/> ESA account customer - provide the last 4 digits of the card saved on file with ESA _____ <input type="checkbox"/> One-time / non-account customer - please call 877-ESA-SAFE (372-7233) , Mon-Fri 7:00AM-4:30PM	*Ready date: _____			
Applicant Information - please provide a complete mailing address					
Name: _____					
Address: _____		Unit/Suite: _____			
City: _____ Prov/State: _____		Country: _____			
Phone: _____ Email: _____		Fax: _____			
Site Information					
Site Name: _____					
Civic #: _____		Street: _____			
If street is a numbered Regional Road, County Rd, Hwy - note the alternate street name (if appl): _____					
City/Town: _____ Twp/Region _____		Other _____			
Main Intersection _____		Water Travel Required? <input type="checkbox"/> 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 _____		Cell Ph _____ Email _____			
Work Items					
Signs with Remote Transformers or Ballasts (Check One) (C057)					
<input type="checkbox"/> Skeletal Neon <input type="checkbox"/> Neon Channel Letter/Box <input type="checkbox"/> Florescent Channel Letter/Box					
Sign 1 - # of Transformers or Ballasts	Sign 2 - # of Transformers or Ballasts	Sign 3 - # of Transformers or Ballasts	Sign 4 - # of Transformers or Ballasts	Sign 5 - # of Transformers or Ballasts	Sign 6 - # of Transformers or Ballasts
Outline Lighting with Remote Transformers or Ballasts (Check One) (C058)					
<input type="checkbox"/> Skeletal Neon <input type="checkbox"/> Florescent					
<input type="checkbox"/> Wiring of Power To Signs, Transformers or Ballasts Number of Units _____					
Note: Wiring of Power To Sign is the wiring from distribution panel to the sign, can be referred to as primary wiring.					
Comments / Driving Directions / Work Locations					
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					

*See 2020 Wiring Fee Guide for details