



## Designated Master Electrician Acknowledgement of Responsibility

I, \_\_\_\_\_, ECRA/ESA Master Electrician Licence  
(Name)

Number \_\_\_\_\_, DO HEREBY DECLARE that I am an  employee  
(ECRA/ESA ME Licence Number)

director/officer/owner/partner of \_\_\_\_\_  
(Name of Electrical Contracting Business)

By signing this document, I affirm that I am actively employed with the above named Electrical Contracting Business, and I assume responsibility for the personal planning and direct supervision of all electrical work carried out on behalf of the electrical contractor. I further agree to ensure that the electrical work is carried out in accordance with applicable law, including the Electrical Safety Code and the laws relating to health and safety and consumer protection, on behalf of the electrical contractor.

I state that the information contained on this form is true and correct to the best of my knowledge. I understand that providing false information is a chargeable offence and is also grounds for denial, suspension, or revocation of an electrical contractor and master electrician licence.

\_\_\_\_\_  
Signature of Master Electrician Licence Holder

\_\_\_\_\_  
Date

### Statutory Authority:

**Ontario Regulation 570/05 Section 7 (1), (2) and Section 28** A master electrician shall not accept the master electrician designation on behalf of more than one electrical contractor at a time, and the designated master electrician must be actively employed by the designating electrical contracting business. A master electrician shall notify the Director within five business days of their change in designation for an electrical contracting business. Failure to comply with the above may lead to suspension or revocation of the electrical contractor and master electrician licence.

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). Form 1294G 10/15