

## APARTMENT & RETIREMENT HOME

Date:  ESA Account #:						I confirm that the information provided in this form is true, complete and accurate.											<b>/ for:</b> <b>fill Notify</b> Rough-In			
ECRA/ESA Lic #:						Name: Signature:											*5	Service		
Payment Method													*F	RI & Service						
	Charge to ESA Account Credit Card														*1	Disconnect				
Cheque / Money Order  Call 1-877-372-7233 to discuss fees; One-time / non-account customer - enter the last 4 digits of the card saved on file  One-time / non-account customer - DO NOT submit this form to pay by credit card. To comply with Credit Card Payment security requirement												*1	rench							
can 1-37-27-23 to discuss lees, attach the cheque / money order to the completed form and mail to the address noted above.  Ordertine / note above													-	Final						
								nforma				He	it/Cuito						*Ready Date	
Address												Unit/Suite Prov/State								
Country Posta			tal Code	Code Ph#													O/Job#			
						S														
Site NameUnit(s)																				
Civic # Street City/Town																				
If street is a numbered Regional Rd, County Rd, or Hwy - provide the alternate street name (if appl)													equired? Y	es						
Work Contact - this notification will be returned if a Work Contact name & cell phone / email address are not provided																				
Name         Cell Ph         Email																				
Common						partment		tional foo	o onnby f	ar thana				Nev	v Stru	ctures	(4.1.3)			
Common and parking areas are included in the unit fee for new builds and renovations; additional fees apply for these installations:  Indicate # of apartment units with:																				
	1. Mechanical equipment: Note the details in the table below 1-80 Outlets (R091)																			
													f Devices:							
	ercial / Retail areas:					A Notificati A Notificati											078) 018)		_	
	able energy:					0kW Notifi						iees ioi L	Jiaiysis	IVIACIIIIIE	recep	iacies (C	010)		=	
						to Existi	ing Ap	artmen	t Buildi	ngs an	d Apar	tment U								
Renovations to Apartment Units (4.2.2)  Record the number of units being renovated in each category and specify the work details in the table below  With 1-3  With 4-9  Same time, i.e. sub-metering conversion, or replacing baseboard from the same time, i.e. sub-metering conversion, or replacing baseboard from the same time, i.e. sub-metering conversion.													iple apartm							
Outlets/Panels Outlets/Panels With 10-40 Outlets/Panels						With 41+ Outlets/Panels						alarm devices, etc. # of units								
(R015 1st (R069) (R017)					(R018)	R018) (R094)						Specify:								
Work in common areas is included in the unit fee; if work occurs in common areas at the same time as the unit renovations, please note the details in the Comments below so it is included on your Certificate. If work is limited to the common areas ONLY, please submit on the LV ICIA Notification.  See the Retrofitted Luminaires Notification if the work involves from the approved design by use of approved retrofit kits; or b components to convert them into more efficient or into different into more deficient into more deficient or into different into more deficient into mo														or by chan	ging the					
Please	specify quantity of each ty	pe of devi	e in each	n apartmer	nt unit beir	ng renovated	d (attach	an additio	nal page i	f more sp	ace is re		dditional	units)						
	Unit/Suite #	Outlets	Fixtures	Switches	Fire Alarm/ Security Devices	Baseboard Heaters	Fans	Dish- washer (lic)	Power Outlets	Range- hood (lic)	Sub- Panel	TOTAL (Sums based on inputs)	Infloor Heat	Jacuzzi Tub	A/C	Furnace	Water Heater	Dialysis Receptacle (C018)	EV Charger (R078)	
	on Areas incl at same time as unit renovations																			
	as unit renovations																			
	Tre	nch / O	erhead	d Lines	Poles (	5.4.2, 5.4	.1)						Poo	ls, Hot	Tubs	& Saun	as (4.5, 4	.4.1)		
	Underground Secon	ndary Line	e (trench	n) (C050)		-					Indica	te all tha	t apply:							
Trench inspected at the same time as other work? COSE																				
													mata:							
Driving Directions / Comments / Additional Work Details  Fee Estimate incl HST																				
agreement w	personal information to the Elect ith the Province of Ontario. If you	provide us wi	th the perso	onal informat	ion on behalf	of another ind	ividual, yo	u represent	that you hav	e all neces										