

Town of Petrolia Special Events Manual

EVENT TYPE 4

EVENT ON TOWN STREET/ROAD and/or PARKING LOTS
as well as TOWN PARKS and/or FACILITIES (Combination of
Event Type 2&3)

For events taking place primarily in Town
Streets/Roads and/or parking lots as well as
Town Parks and/or Facilities (i.e.
festivals/concerts/exhibit for one or more days).

INTRODUCTION

Throughout the year, the Town of Petrolia is a host to a variety of special events that require planning, communication, and co-operation from all parties involved.

The Town of Petrolia recognizes the importance of special events in promoting the community, as well as enhancing and creating a desired community image. Special Events bring tourist dollars into the geographical region during the community's off-season or in periods when the number of tourists is lower than normal. Special Events enhance the image of the community; encourage resident and non-resident participation, spectator satisfaction, and civic pride.

It is the intention of this manual to identify and assist the organizer in following the guidelines set out by the Town of Petrolia and other organizations such as the Community Health Services and O.P.P. who may have input in regard to the operation of the event.

The utilization of this manual will ensure that all necessary approvals will be in place before the actual date(s) of the event.

The use of this manual will allow us to work together to present special events that will be exciting and positive additions to our community.

If you have any immediate questions or comments please contact the Director of Community Services at (519) 882-2350 (weekdays between 8:30 a.m. and 4:30p.m.).

Best wishes as you plan and prepare your special event.



TOWN OF PETROLIA SPECIAL EVENTS MANUAL

EVENT TYPE 4

EVENT ON TOWN STREET/ROAD and/or
PARKING LOTS as well as TOWN PARKS
and/or FACILITIES (Combination of Event
Type 2&3)

For events taking place primarily in Town Streets/Roads and/or parking lots as well as Town Parks and/or Facilities (i.e. festivals/concerts/exhibit for one or more days.

SPECIAL EVENTS

Thank you for your interest in holding a special event in the Town of Petrolia. Enclosed are the materials needed to obtain a Special Permit for your upcoming event. Please follow the application directions very carefully. An application checklist is included for further assistance. No Special Event Permit will be issued without submittal of a signed application and requested documentation. Your event must have final approval by the Town of Petrolia Council.

The Director of Community Services will assist you throughout this process and will be your primary contact. You will be notified by the Director of Community Services if your event requires additional permits such as: tent permit, temporary food permit, liquor license permit, which must be obtained and approved before you receive a Special Event Permit.

Please read the Special Events Manual and follow each requirement that your event falls under.

Special Event Applications Required for event on Town Street/Road and/or Parking Lots as well as Town Parks/Facilities:

Appendix A – Fee Schedule

Appendix B - Special Event Permit Application

Appendix C-1 – Certificate of Insurance

Appendix C-2 – Road Closure Request

Appendix D – Fire Safety - Tents/Shelters

Appendix E – Business Application

Appendix F – Request to use Facilities

Appendix G – Community Health Inspection

Appendix H-1, H-2, H-3, H-4 – Electrical

Appendix I – Labour & Equipment Rates

Appendix J-1, J-2 – Merchandise & Food Vendors Lists

Appendix K – Site Plan (if required)

Special Occasion Permit/Application – Obtain and hand into LCBO, copy to be handed in for our records

Consent to Release Personal Information for Emergency Purposes

Permit Fees – No fees at this time

Payment – No fees at this time



COMMUNITY SERVICES

411 Greenfield Street • P.O. Box 1270 • Petrolia • Ontario • N0N 1R0 Telephone: (519) 882-2350 Fax: (519) 882-3373

ITEM	FEE	NEEDED
Administration Fee:		
Marriage Licence	\$110.00	
Ceremonies – Mon to Friday 8:30am-5:00pm	\$350.00	
Weekends & after 5:00 pm	\$450.00	
Zoning By-Law or Official Plan	\$30.00	
Zoning Maps		
Large	\$8.00	
Small	\$4.00	
Service or Permit Fee:		
Building / Tent permit (additional tents)*	N/C*	
Noise and Parking by-law deposit**	N/C**	
Food Service / vendor permit (Mobile Canteen)	\$50.00/Vehicle	
Road Closures/Detours**	N/C**	
Partial / Full road closure permit**	N/C**	
Traffic & Public Works (fees for signs, deliveries, damages)	non-at this time	
Beer Garden Permit*	non-at this time	
Turf Restoration (deposit if required)***	If Required	
Bluewater Power (see page 12)		
St. John Ambulance (donations appreciated)		
Lambton EMS		
By-Law Enforcement/Security Fee	Actual Billing	
O.P.P./Security Fee	Actual Billing	
Fire Department: Town of Petrolia Fire Department		
Letters to Lawyers/Insurance Companies	\$25.00/flat fee	
Posting a Fire Guard	\$60.00/hr/man	
Stanby-Truck-one hour or part hour	\$300.00/truck/hr	
Fireworks Inspections/Permit	\$50.00	
Premise for Approval of Liquor Licenses	\$125.00/ inspection	
Determination of Occupancy Load/Liquor License in place	\$125.00	
Special Occasions Permit-non liquor	\$30.00/initial \$15.00/call back	
Special Occasions – Burning Permit	\$25.00	



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Zoning By-Law or Official Plan	\$30.00	
Zoning Maps		
Large	\$8.00	
Small	\$4.00	
Service or Permit Fee:		
Building / Tent permit (additional tents)*	N/C*	
Noise and Parking by-law deposit**	N/C**	
Food Service / vendor permit (Mobile Canteen)	\$50.00/Vehicle	
Road Closures/Detours**	N/C**	
Partial / Full road closure permit**	N/C**	
Traffic & Public Works (fees for signs, deliveries, damages)	non-at this time	
Beer Garden Permit*	non-at this time	
Turf Restoration (deposit if required)***	If Required	
Bluewater Power (see page 12)		
St. John Ambulance (donations appreciated)		
Lambton EMS		
By-Law Enforcement/Security Fee	Actual Billing	
O.P.P./Security Fee	Actual Billing	
Fire Department: Town of Petrolia Fire Department		
Letters to Lawyers/Insurance Companies	\$25.00/flat fee	
Posting a Fire Guard	\$60.00/hr/man	
Standby-Truck-one hour or part hour	\$300.00/truck/hr	
Fireworks Inspections/Permit	\$50.00	
Premise for Approval of Liquor Licenses	\$125.00/ inspection	
Determination of Occupancy Load/Liquor License in place	\$125.00	
Special Occasions Permit-non liquor	\$30.00/initial \$15.00/call back	
Special Occasions – Burning Permit	\$25.00	



APPENDIX B COMMUNITY SERVICES

411 Greenfield Street • P.O. Box 1270 • Petrolia • Ontario • N0N 1R0 Telephone: (519) 882-2350 Fax: (519) 882-3373

SPECIAL EVENTS PERMIT APPLICATION

Applicants Name: _____ Signature: _____
Designated Person in Charge at Event: _____ Signature: _____
2nd Designated Person in Charge at Event: _____ Signature: _____
Organization: _____
Mailing Address: _____ Postal Code: _____
Telephone Number: (Day) _____ Night) _____
Fax Number: _____ E-mail Address: _____

Event Name: _____
Event Description: _____

Proposed Date(s)	Operating Hours	Estimated daily Attendance
------------------	-----------------	----------------------------

Location Requested: _____
Event Included: Fire _____ Street Closure (see below) _____ Electrical _____
Sound Amplification _____ Raffle/Draw _____ Alcohol _____ Vendors _____
Expected no. of people in licensed area _____ Fireworks _____

Type of Event:
Parade _____ Cycling Event _____ Walkathon _____ Run _____ Special Event/Festival _____
Other (Specify) _____

Function to Commence: _____
Location Date Time

Function to Terminate: _____
Location Date Time

Street Closure: Yes _____ No _____
Route: _____

History of Event: _____ Number of years event held _____ First Time Event _____
Please list any incidents that have occurred during this event and the action taken.
(Please write on a separate paper if needed)

Must attach the following:

1. A detailed map or site plan clearly and accurately identifying location of tent structures and/or beer gardens, any enclosed fenced area, and areas used for cooking facilities.
2. Applicants must supply event insurance: \$2million in General Liability Insurance, naming the Town of Petrolia as additional insured. (See the manual for the details.)

EVENT AGREEMENT

I have read the terms and conditions as outlined and fully disclosed all details and components of the proposed event, and agree to the term as outlined. I will abide by the "Conditions and Regulations" contained in the Special Events Manual and the applicable policies, procedures and responsibilities outlined.

I am aware that failure to comply as outlined could lead to cancellation of this permit at anytime.

(Upon approval of this application, this document constitutes a Special Events Permit.)

NAME: _____ DATE: _____
(Please Print)

SIGNATURE: _____

PLEASE RETURN TO:

ATTN: SPECIAL EVENTS CO-ORDINATOR

Town of Petrolia
411 Greenfield Street
P.O. Box 1270
Petrolia, Ontario
N0N 1R0

Questions Call (519) 882-2350

Attachments included: Site Plan _____ Insurance Certificate _____
Building Permit _____ Hydro Inspection _____
Special Occasion Permit _____
Municipal Alcohol Policy _____

(OFFICE USE ONLY) DISTRIBUTION

DEPARTMENT	COMMENTS
Director of Operation	
Director of Community Services	
Director of Finance	
C.A.O/Clerk	
Clerk-Administrator	
Fire Department	
Police Services-O.P.P.	
By-Law Enforcement Officer	

OTHER TERMS AND CONDITIONS FOR THIS EVENT

Official Use Only	Site plan received	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Permit approved:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Insurance Certificate	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Permit number:		
Date Received				Date Approved:		



APPENDIX C-1 COMMUNITY SERVICES

411 Greenfield Street • P.O. Box 1270 • Petrolia • Ontario • N0N 1R0 Telephone: (519) 882-2350 Fax: (519) 882-3373

PROOF OF LIABILITY INSURANCE WILL BE ON THIS FORM ONLY (WITH NO AMMENDMENTS)
NOTE: INSURANCE IS PLACED IN PRIMARY AND EXCESS LAYERS, FILE SEPARATE
CERTIFICATES FOR EACH

CERTIFICATE OF INSURANCE

This is to certify, that the insured set forth, is insured with the Insurance Company, which insurance
is described below:

Name of Insurance Company

Name of Insured		Address of Insured		
Type of Insurance	Policy Number	Effective Date	Expiry Date	Limits of Liability Bodily Injury & Property Damages - Inclusive
General Liability				\$

General Liability Including: Personal Injury, Contractual Liability, Non-Owned Automobile Liability, Owner's and Contractor's Protective Coverage Products - Completed Operations, Contingent Employers Liability, Cross Liability Clause and Severability of Interest Clause.

Type of Liability	Policy Number	Effective Date	Expiry Date	Limits of Liability Bodily Injury & Property Damages - Inclusive
Motor Vehicle Liability				\$

Motor Vehicle Liability - Must cover all vehicles owned by the insured.

The Town of Petrolia has been added as an additional insured but only with respect to its interest in the operations of the named insured.

This is to certify that the Policies of Insurance as described above have been issued by the undersigned to the insured named above and are in force at this time.

If cancelled or changed in any manner, that would affect the Town of Petrolia as outlined in coverage specified herein for any reason, so as to affect this certificate, thirty (30) days prior written notice by registered mail be given by the insurer(s) to the:

Town of Petrolia
Attention: Legal Services
411 Greenfield Street,
P.O. Box 1270
Petrolia, Ontario
N0N 1R0

This certificate is executed and issued to the aforesaid Town of Petrolia, the day and date herein written below.

Date	Name of Insurance Company (not broker)
Name of Insurance Broker	Authorized Representative or Officer By
	(please print) (signature)

Road Closure Application

TO: Town of Petrolia

FROM: _____

(i.e. Service Group)

RE: _____

(i.e. Santa Clause Parade)

The undersigned, as organizers and responsible parties for that certain parade event know as _____, to be held in the Town of Petrolia, in the County of Lambton on _____, herby acknowledge that they have applied for and been granted, on certain conditions, temporary closure of portions of County Roads/Municipal Roads(_____) for the purposes of the holding of such parade event.

The undersigned acknowledge that they have obtained comprehensive liability insurance coverage in respect of personal injury and death and property damage, to a maximum limit of FIVE MILLION DOLLARS (5,000,000.00) per event, which policy of insurance names, among others, the Corporation of the County of Lambton/Town of Petrolia as an insured.

The undersigned hereby agree that they, alone and, if applicable, in combination, shall indemnify and save harmless the Corporation of the County of Lambton and the Corporation of the Town of Petrolia from and against all claims, losses, damages, judgments, costs, expenses, actions, and other proceedings made, sustained, brought, prosecuted, or threaten to be brought or prosecuted that are based upon occasioned by or

Road Closure Application

TO: Town of Petrolia
FROM: _____
(i.e. Service Group)
RE: _____

(i.e. Santa Clause Parade)

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FIRE SAFETY REQUIREMENTS FOR TENTS / SHELTERS

Applicable to all tents having an area in excess of 645 square feet or 60 m².

LOCATION AND / OR ADDRESS WHERE TENT IS SET UP: (Please Print)	
--	--

1. Location of nearest telephone to call 911: _____
2. Number, type and location of portable fire extinguishers provided:
 - a) Number _____
 - b) Type(s) _____
 - c) Location(s) _____
3. Name of person employed for firewatch duty: (if required) _____

Note: Such duties to include keeping the means of egress clear, proper use and storage of combustible materials and general enforcement of regulations as determined by the lessee.

4. Number of exit signs posted: _____

Note: Exit signs are required for all tents having wall panels and/or where exiting is impeded by ropes, tables, ect.
5. Has emergency lighting been tested? Yes _____ No _____ (Applicable to night-time tent use only.)
Are open flame devices such as gas heaters, barbecues and fuel-fired appliances intended for use?
6. use? _____

Note: Must not be located adjacent to an exit or access to an exit. Site plan must include cooking area with dimensions.

7. Has a building permit for the erection of this tent been obtained? (If required) Yes _____ No _____
8. Provide the name, address and telephone number of person(s) or company providing the tent rental:
Name - _____
Address - _____
Phone - _____
9. Provide the name, address and telephone number of person(s) leasing the tent:
Name - _____
Address - _____
Phone - _____

A copy of this Fire Safety Plan shall be approved by the Chief Fire Official or his designate and be posted in a conspicuous location near the main entrance.

Approved by: _____ **Dated:** _____



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Business Application

Name of Applicant

**Food Vendors please continue to fill out back of application
Non Food Related Vendors only need to fill out front page**

First

Middle

Surname

Address

Street

P.O. Box

City/Town

Province

Postal Code

Telephone

Business:

Home:

Name of Business

Business Address

Street

P.O. Box

City/Town

Province

Postal Code

I, undersigned, undertake that I will promptly notify the Licensing Division of the Town of Petrolia of any sale of said business, any change of address of said business, or any discontinuance of business in the location indicated above.

Applicant Signature

Date

OFFICE USE ONLY

License Type	Number	Date	Amount	Zoning	Representative

Application Date: _____

License No. _____

Application For Catering Vehicle/Mobile Refreshment Vehicle License

This Catering Vehicle/Mobile Refreshment Vehicle has received and copies are attached of all applicable inspections as indicated on the reverse: Yes _____ No _____

LICENSE FEE:

(fee schedule on reverse) \$ _____ Door to Door _____

Specific Location _____

(Maximum 3 months)

Building Inspector Signature _____

Municipal Law Enforcement Signature _____

Specific Location/day _____

(Maximum 3 days)

Declaration

I, _____ of _____

solemnly declare that all the

statements contained in this application are true and I make this solemn declaration conscientiously believing it to be true.

Signature of Applicant

This Catering Vehicle/Mobile Refreshment Vehicle has been inspected as required:
(as applicable)

Date: _____

Health Inspector

Date: _____

Fire Chief

Date: _____

Propane Fitter

Date: _____

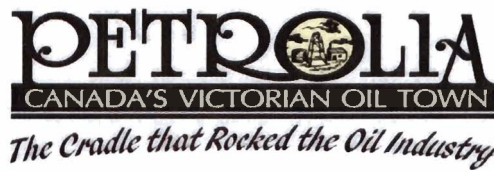
Hydro Inspector(for permanent locations, only)

Date: _____

By-Law Enforcement Officer

Date: _____

Building Inspector



APPENDIX F COMMUNITY SERVICES

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REQUEST FOR USE OF FACILITIES

FACILITY(IES) REQUIRED	_____	DATE(S) REQUIRED	_____
SETUP TIME REQUIRED	_____		
REMOVAL TIME REQUIRED	_____		
TIME OF ACTUAL EVENT	_____		
ORGANIZATION	_____	TYPE OF EVENT	_____
CONTACT NAME	_____	PHONE (B)	_____
		PHONE (R)	_____
ADDRESS	_____	POSTAL CODE	_____

EQUIPMENT OR SERVICES RENDERED - Please indicate by using a checkmark. The following services are available.
Please note those marked with an asterisk (*) have additional fees levied if available at said Facility.

*Parking Attendants	_____	*Kitchen Facilities	_____	*Piano	_____	Podium	_____
*Public Address System	_____	Canteen	_____	*Socan	_____		
*Coolers and Bar Setup	_____	*Portable Stage Setup	_____				
(is music to be part of your event)							
Tables & Chairs for	_____	(number of people attending)		*Paper for Tables	_____		
*Head Table Risers	_____						
*Coatcheck	_____	(The recommended ratio of staff per attendance) 1=0-250 2=351-500 3=510-750 4=751&up					

Name of Caterer	_____	Security Required	Yes	_____	No	_____
		(If yes # required	_____)		
		O.P.P. Signature	_____			

PLEASE SPECIFY OTHER EQUIPMENT OR SERVICES REQUIRED: _____

*All groups, organizations or individuals who are renting or using our facilities for an event MUST have liability and property damage insurance to the extent of (2) two million dollars with the Town of Petrolia named an additional insured on the policy. No confirmation of the rental will be issued by the Recreation Facilities Office until certificates have been received and found to be satisfactory to the Town of Petrolia's Insurer.

I AM AWARE THAT THIS IS A REQUEST AND SUBJECT TO APPROVAL AND CONFIRMATION BEFORE IT IS BINDING.

Date : _____ Signature: _____

FOR OFFICE USE ONLY

DEPOSIT AMOUNT _____ DATE: _____ CONTACT NUMBER _____

COMMENTS: _____



ENTERTAINMENT INDUSTRY ELECTRICAL INSPECTION / CONSULTATION

Notice of Legal Requirement

Under the provisions of the Ontario Electrical Safety Code, any electrical equipment installed in Ontario, temporary or otherwise, must have an application for inspection. This includes all Film, Television, Live Performance or Event Productions including but not limited to Live Productions regardless of site or location.

Failure to comply could result in unsafe working sites, production downtime and/or fines.

Inspection Process

Step 1

Fill in an Application for Electrical Inspection.

Step 2

Fax or email the Application to the ESA Customer Service Centre a minimum of 48 hours prior to the production set-up.

Optional

Phone in your request for an Electrical Inspection to the ESA Customer Service Centre, a minimum of 48 hours prior to the production set-up.

ESA Customer Service Centre

P.O. Box 24143
Pinebush Postal Outlet
Cambridge, ON, N1R 8E6
Fax: (800) 667-4278
Phone: (877) 372-7233
email: esa.cambridge@electricalsafety.on.ca

For inspection information please call the ESA Customer Service Centre for the name and number of your local Inspector.



**Electrical
Safety
Authority**

Entertainment Industry Application for Electrical Inspection

Please complete and return for processing to the
ESA Customer Service Centre. Fax (800) 667-4278,
Phone: (877) 372-7233, email: esa.cambridge@electricalsafety.on.ca

Applicant Information

Name			
Address			
City/Province		Postal Code	
Contact (Producer / Production Manager)		Phone #	
		Fax #	
		Email	

Location Information

Production Name/ Job Number		Purchase Order #	
Production Location / Studio			
Location Electrical Contact(s)		Phone #(s)	
		Other #(s)	
Expected dates of set-up		Rain dates	
Expected production dates		Hiatus dates	
Best date / time for inspection			

- For inspection fees visit the ESA website www.esasafe.com
- Daily call sheets should be faxed to **(905) 712-3013**.
- For inspection information please call the ESA Customer Service Centre at (877) 372-7233.

Customer Payment Method

ESA Charge Account #: _____

Credit Card: ☐ Visa ☐ MasterCard ☐ American Express

Cardholder Name: _____

Expiry Date: _____

Card Number: _____

Authorization: _____

Cheque Payable to Electrical Safety Authority:

Cheque #: _____

Please circle type of production:

Film

Commercial

Television

Event

Live Performance

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



P.O. Box 24143, Pinebush Postal Outlet,
Cambridge, Ontario, N1R 8E6

Phone: 1-877-ESA-SAFE (372-7233)
Fax: 1-800-667-4278

High Voltage, Substation, Pole Line Application for Inspection and Fee Estimate

Date _____	Account# _____	ECRA/ESA Lic# _____	ACP # _____	Ready for: <input type="checkbox"/> Rough-In <input type="checkbox"/> Service <input type="checkbox"/> R/I & Service <input type="checkbox"/> Final <input type="checkbox"/> Disconnect <input type="checkbox"/> Will Notify
Applicant Information				
Name _____				
Address _____			Unit/Suite _____	
City _____		Province/State _____	Country _____	Date Ready _____
Postal Code _____		Phone # _____	Fax # _____	
Site Information				PO/Job #
Name _____				
Civic/Blue # _____	Street _____		Sub Lot _____	Other _____
City _____		Twp _____	Rural Lot _____	Con _____
Site Contact: _____	Phone # _____		Main Intersection _____	
High Voltage (>750 Volts) (5.1.1)*				Substation Maintenance
HV Service - Metal Enclosed (C001) _____ Qty _____		Open Air (C005) _____ Qty _____		Date _____ \$ _____
HV Service - Open (C002) _____ Qty _____		TLO (C063) _____ Qty _____		Date _____ \$ _____
Loadbreak Pole (C002) _____ Qty _____		Metalclad (C064) _____ Qty _____		Date _____ \$ _____
Switchboard/Panel (C003) _____ Qty _____		Indoor (C065) _____ Qty _____		Date _____ \$ _____
Add'l cubicles (C004) _____ Qty _____		Note: Equipment replacements and major repairs are additional. Please indicate all replacement/major repair items:		
Preassembled Substation _____ Qty _____				
Station Grounding Grid _____ # rods _____				
Station Fence Grounding _____ meters _____				
HV Transformers/Motors/Generators, etc (5.7)*				
V _____ (C024) HP _____ Qty _____ \$ _____		ACP Pole Line Maintenance (C069)		
Describe: _____		Voltage _____ \$ _____		
Transformer Pad Grounding (C052) _____ Hrs _____		Amperage _____		
		Metering Description _____		
		Connection Date _____		
		Like for Like Replacement Details: _____		
Underground/Overhead Lines (5.6)*				
Underground Trench - Primary Line (C050) _____ M _____				
Underground Trench - Secondary Line (C049/C050) _____ Qty _____				
Secondary inspected at the same time as other work (Y/N) <input type="checkbox"/>				
Primary/Secondary Lines - # of Poles (C044) _____ Qty _____				
		Consultation (MI05) _____ Hrs _____ \$ _____		
Driving Directions / Comments / Work Details				
Payment Method				Total Fee Estimate
<input type="checkbox"/> Cheque <input type="checkbox"/> Credit Card Card # _____ Expiry _____ Name _____				0

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



P.O. Box 24143, Pinebush Postal Outlet,
Cambridge, Ontario, N1R 8E8

Phone: 1-877-ESA-SAFE (372-7233)
Fax: 1-800-867-4278

Low Voltage Industrial/Commercial/Institutional/Agricultural Application for Inspection and Fee Estimate

Date _____	Account# _____	ECRA/ESA Lic# _____	ACP # _____	Ready for:
Applicant Information				<input type="checkbox"/> Rough-In <input type="checkbox"/> Service <input type="checkbox"/> R/I & Service <input type="checkbox"/> Final <input type="checkbox"/> Disconnect <input type="checkbox"/> Will Notify
Name _____				
Address _____		Unit/Suite _____		
City _____		Province/State _____ Country _____		
Postal Code _____		Phone # _____ Fax # _____		Date Ready _____
Site Information				PO/Job #
Name _____				
Civic/Blue # _____		Street _____ Sub Lot _____ Other _____		
City _____		Twp _____ Rural Lot _____ Con _____		
Site Contact _____		Phone # _____ Main Intersection _____		
Service (<=750 Volts) (5.1.2, 5.1.3, 5.14)*				Outlets & Devices (5.4)*
Amp _____	City _____	(C006, C007, C008) \$ _____		Outlets _____ Fixtures _____ Switches _____ Street Lighting _____
Central Metering (C051) _____		Amperage _____ \$ _____		Signs _____ Motors <1 HP _____ Htg./Cooking Devices <5kW _____
Permanent Pole Service (C048) _____		Amperage _____ \$ _____		Other (Describe): _____
Electronic Metering (e.g. Donuts) _____		Qty _____ \$ _____		Non-Classified (C017) _____ Qty _____ Classified (C018) _____ Qty _____ \$ _____
Low Voltage Service Maintenance (C072) _____		Date _____ \$ _____		Power Outlets: (>20A or >120V)
				Non-Classified (C053) _____ Qty _____ Classified (C054) _____ Qty _____ \$ _____
Panelboards (Splitters/Disconnects)(<=750 Volts) (5.5)*				Underground/Overhead Lines (5.6)*
Amp _____	City _____	(C019, C020, C021) \$ _____		Underground Trench - Primary Line (C050) _____ Qty _____ \$ _____
Describe: _____				Underground Trench - Secondary Line (C049/C050) _____ Qty _____ \$ _____
				Inspected at the same time as other work (Y/N) <input type="checkbox"/>
				Primary/Secondary Lines - # of Poles (C044) _____ Qty _____ \$ _____
Temporary Type Services (5.1.5, 5.1.6, & 5.2)*				Miscellaneous Items (5.9, 5.10, 5.12, 5.13, 5.15 & 6.2)*
Temp 1 Phase (C012) _____ Qty _____		Portables (C055) _____ Qty _____ \$ _____		Installation of branch circuit only - for equipment (C071) _____ Qty _____ \$ _____
Temp 3 Phase (C016) _____ Qty _____		Const Trailers (C058) _____ Qty _____ \$ _____		Trolley, Bus Duct, Cable Tray (C028) _____ m _____ \$ _____
Subdivision (C013) _____ Qty _____				Carnivals - # of Booths/Rides (C030) _____ Qty _____ \$ _____
LV Transformers/Motors >1HP/Generators/Cable TV/Phone Booths (5.7)*				Trade Shows - # of Booths (C059) _____ Qty _____ \$ _____
V _____	HP _____	(C023) \$ _____		Billboards (C027) _____ Qty _____ \$ _____
Describe: _____				New Traffic Signal System (C045) _____ Qty _____ \$ _____
Transformer Pad Grounding (C052) _____ Hrs _____ \$ _____				General Inspection (G001) _____ Hrs _____ \$ _____
Driving Directions / Comments / Work Details				Consultation (MI05) _____ Hrs _____ \$ _____
Payment Method				Total Fee Estimate
<input type="checkbox"/> Cheque <input type="checkbox"/> Credit Card				0
Card # _____ Expiry _____				
Name _____				
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 2008 Electrical Inspection Fee Schedule Section for Details Form 1015LV-G (Rev June/08)) The total cost may change pending a site visit.				

APPENDIX I

Labour and Equipment Rates : Effective January 1, 2008

Description	Internal Rate	External Rate	Notes
Director of Operations	\$ 45.50	\$ 50.00	2 hour minimum
Works Dept. Foreman	\$ 34.50	\$ 39.00	2 hours minimum (1.5 for overtime)
Water Dept. Foreman	\$ 32.50	\$ 36.50	2 hours min. (1.5 for overtime)
Mechanic	\$ 29.00	\$ 35.50	2 hours min. (1.5 for overtime)
Gen. Labour (class 4)	\$ 26.00	\$ 29.00	2 hours min. (1.5 for overtime)
Lead Hand	\$ 28.60	\$ 31.50	2 hours min. (1.5 for overtime)
Support Services	\$ 26.00	\$ 29.00	2 hours min. (1.5 for overtime)
Motor Grader	\$ 52.00	\$ 72.00	2 hours min. (1.5 for overtime)
Loader/Backhoe	\$ 52.00	\$ 72.00	2 hours min. (1.5 for overtime)
Compressor	\$ 80.00	\$ 80.00	Day rate, only
Portable Welder	\$ 80.00	\$ 80.00	Day rate, only
Ford 3000	\$ 44.00	\$ 55.00	2 hour min. (1.5 for overtime)
John Deere	\$ 44.00	\$ 55.00	2 hour min. (1.5 for overtime)
Kubota-245	\$ 44.00	\$ 55.00	2 hour min. (1.5 for overtime)
Ditch Witch	\$ 44.00	\$ 55.00	2 hour min. (1.5 for overtime)
Street Sweeper	\$ 44.00	\$ 65.00	2 hour min. (1.5 for overtime)
Flusher Truck	\$ 44.00	\$ 65.00	2 hour min. (1.5 for overtime)
1 Ton Dump	\$ 35.00	\$ 44.00	2 hour min. (1.5 for overtime)
3 Ton Dump	\$ 37.00	\$ 46.00	2 hour min. (1.5 for overtime)
5 Ton Dump	\$ 39.00	\$ 55.00	2 hour min. (1.5 for overtime)
½ Ton Pickup	\$ 32.00	\$ 36.00	2 hour min. (1.5 for overtime)
¾ Ton Pickup	\$ 33.00	\$ 37.00	2 hour min. (1.5 for overtime)
Scissor Hoist	\$ 32.00	\$ 40.00	2 hour min. (1.5 for overtime)

Grass Cutting : Minimum charge = \$ 195.00. Hourly rate = \$ 80.00.

Snow Removal : Minimum charge = \$ 195.00. Hourly rate = \$ 80.00.

Water Shut Off : \$ 50.00 min. charge. Overtime hours / weekends = Call In hours, as per CUPE agreement.

Cemetery ; Labour at \$ 60.00 per hour, 2 hour minimum. Plus applicable equipment rates.

NOTES: - Small tools are included in all labour rates.

- All equipment rates include operator and attachments, when utilized.

- All materials / consumables charged at cost, plus 15%, handling and restocking.

- \$ 35.00 administration charge applies to all external cases.

NO THIRD PARTY RENTAL OF SMALL TOOLS OR EQUIPMENT.

LIST OF FOOD VENDORS

EVENT NAME:

	FOOD Vendors Business Name	Owner's Name	Address	Phone Number	Product to be Sold
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					

LIST OF MERCHANDISE VENDORS

EVENT NAME: _____

	Vendors Business Name	Owner's Name	Address	Phone Number	Product to be Sold
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					

SITE PLAN

Please sketch below the event area indicating the location of food vendors (numbered as indicated on Appendix J-1), garbage receptacles and washrooms.

OR

Attach an equivalent site map.

Consent to Release

I _____ and _____ give the
Town of Petrolia consent to release contact information (to third parties) for emergency
purposes regarding (event name) _____
on (date of event) _____

Applicant Name (print) _____

Signature _____

Date _____

Applicant Name (print) _____

Signature _____

Date _____