

ENQUIRIES : TEL NO

Erf No

Northern Region (Despatch & Uitenhage)
(041) 994-1268

Southern Region (PE & surrounding areas)
(041) 392-4162

Register No

- DOMESTIC
- APPLICATION FOR INSTALLATION / ALTERATION OF SERVICE CABLE
- BUSINESS

Machinery and Occupational Safety Act, 1983 Regulation 6(1) of the Electrical Installation Regulations, 1992

PLEASE COMPLETE ALL DETAILS

Name of Electrical Contractor / Accredited Person

Block Letters

Contractor's / Accredited Person's Postal Address

Contractor's Registration No. / Accredited Person's Certificate No.

Telephone Number (s)

Business

Home

Contractor's/Accredited Person's Signature

Name of Signatory (Block Letters)

I hereby advise that the Electrical Installation work will commence at:

Erf No :

Address :

Name of Building :

Floor (Ground; 1st; etc.):

Class of Premises :

Domestic

Business

Name of Person responsible for the fees

Postal Address

E-Mail Address :

Fax Number :

Telephone No :

FOR OFFICIAL USE ONLY

DATE FORMS RECEIVED _____	ADDITIONAL METERS	R	C
DATE PAID _____	LABOUR	R	C
RECEIPT NUMBER _____	CABLE	R	C
VOTE NUMBER _____	MATERIAL	R	C
	VAT	R	C
	TOTAL	R	C

NOTES :

Signature

NOTE For all farms and rural holdings, a full description as per title deeds is required as well as the owner's name, pole number, postal address and telephone number. (If additional space is required, kindly use blocks provided on reverse side)

Account To:

Receipt No :

Date :

Date :

PLEASE MARK WITH	<input checked="" type="checkbox"/>	ALL APPLICABLE WORK TO BE CARRIED OUT	Ω- FOR EXPLANATORY NOTES SEE OVERLEAF
NEW INSTALLATION	<input type="checkbox"/>	REPOSITION METER/S	OVERHEAD TO UNDERGROUND <input type="checkbox"/>
INCREASE IN SUPPLY	<input type="checkbox"/>	CONVERSIONS	REPOSITION CABLE <input type="checkbox"/>
ADDITIONS / ALTERATIONS	<input type="checkbox"/>	BUSINESS SITE INSPECTION	STREETLIGHT <input type="checkbox"/>
READIBOARD	<input type="checkbox"/>	CREDIT METER	PREPAID <input type="checkbox"/>

VOLTAGE AREA Ω

SINGLE PHASE VOLTS

THREE PHASE VOLTS

FORM OF SUPPLY REQUIRED

SINGLE PHASE TWO WIRE

SINGLE PHASE THREE WIRE

THREE PHASE THREE WIRE

THREE PHASE FOUR WIRE

RATING OF SERVICE CABLE REQUIRED : Ω
..... AMPS PER PHASE

ESTIMATED MAXIMUM DEMAND : Ω
.....kVA

Ω NOTE : 1) If in doubt as to the voltage available in a specific area; and
2) For all supplies where the load is estimated at above 80 amps per phase / 50kVA, and all M.V/ H.V supplies; kindly consult the Customer's Section.

DATE OF COMMENCEMENT OF INSTALLATION WORK
(New Services only)

DATE BY WHICH THE SUPPLY WILL BE REQUIRED (MINIMUM 21 DAYS NOTICE)

WILL METER ROOM BE PROVIDED

YES NO

NUMBER OF CONSUMERS TO BE SEPARATELY METERED

SINGLE PHASE THREE PHASE

NATURE OF PROTECTION AT CONSUMER'S MAIN DISTRIBUTION BOARD

ISOLATOR CIRCUIT BREAKER CIRCUIT BREAKER PLUS EATH FAULT PROTECTION

OTHER : PLEASE SPECIFY _____

RATING OF THE ABOVE NAMED PROTECTION AT CONSUMER'S MAIN DISTRIBUTION BOARD
..... AMPS

SIZE OF CONSUMER'S MAIN CONDUCTORS
..... MM²

WAS A PLAN SUBMITTED TO THE BUILDING INSPECTOR FOR THE CONSTRUCTION WORK? YES NO

DECLARATION BY OWNER OR OWNER'S AGENT
(only required for a new service/conversions / meter changes)

1 / We _____
Being the owner/owners's agent of the above premises, do hereby signify my/our permission and consent to the making of the service connection as applied for on the said premises for the purposes of an electricity supply.

I/We agree to abide by the Electricity Supply by-law of the Nelson Mandela Metropolitan Municipality – Electricity and Energy Business Unit.

Owner's or Owner's Agent's signature : _____ Name (Block Letters) _____

Address : _____

Date : _____ ID No : _____
(Copy to be attached to documentation if not available on Treasury Billing system)

NOTE : The installation of the Council's Service Main will not be commenced until all fees and charges have been paid. A letter from the registered owner may be requested.

DETAILS OF PROPOSED INSTALLATION (To be completed by Contractor / Accredited Persons)

FOR OFFICE USE ONLY

ID DOCUMENT LETTER OF AUTHORITY TITLE DEEDS / COUNCILLOR' LETTER READIBOARD