



**Application for Meter Test**

**Applicants Details:**

Surname:			
First Name:			
Title:		Home Phone:	
Business Phone:		Fax:	
Email Address:			

**Installation Address:** ( Address where electricity is required)

Building Name:			
Unit/Flat Number:		House Number:	
Street Name:			
Suburb:			
City / Town:			

**Postal Details:** (Address to send bill if different from the Installation Address)

Building Name / PO Box:			
Unit/Flat Number:		House Number:	
Street Name:			
Suburb:			
City / Town:			
Account Number:			

Sketch of Meter Location if Necessary:

I, , of

do hereby, solemnly and sincerely declare that the above information and statements contained herein are true and correct to the best of my knowledge.

Date at:  on this  day of  2

Signature of Applicant