

APPLICATION FOR CONNECTION



To be completed in BLOCK LETTERS by the electrical contractor or agent, on behalf of the customer.
 A Site Establishment Fee as detailed in ES5 may apply to this installation. You will be notified if a Site Establishment Fee applies to this installation when your Job Number is issued. The Site Establishment Fee is charged when the Notification of Service Work is received.

Fax Sydney and Tuggerah (02) 43998007
 Email to: ea.datanorth@energy.com.au
 Fax Local Call (Not to be used for Muswellbrook) 1300 662 089
 Fax Muswellbrook (02) 65429 037
 Email to ea.datamuswellbrook@energy.com.au

RETAILER

NMI

INSTALLATION ADDRESS

Property Name

Floor **Unit** **Street**

Street

Nearest Cross Street

Suburb

Postcode

Pole/Pillar ID

Existing Meter ID

Office Use Only

Job Number

Site Establishment Fee to be applied

CUSTOMER AND POSTAL ADDRESS

First Name (or Company Name)

Last Name

Floor **Unit** **Street No**

PO Box

Street

Street (cont)

Suburb

Postcode

Phone

Mobile

ELECTRICAL CONTRACTOR/AUTHORISED SERVICE PROVIDER

Electrical Contractor Name

Licence Number

Contact Phone Number

Authorised Service Provider Name

Licence Number

Contact Phone Number

Email Address (Preferred Option of Returning Job Number)

Fax Number

E/C or ASP Postal Address

SERVICE, DEMAND AND LOAD DETAILS (please tick)

Connection Type New <input type="checkbox"/> Alteration <input type="checkbox"/> Upgrade <input type="checkbox"/> Separation <input type="checkbox"/> Amalgamation <input type="checkbox"/> Grid Connected Generation System <input type="checkbox"/>	Service Type Overhead <input type="checkbox"/> Underground <input type="checkbox"/> UGOH <input type="checkbox"/> Off Pole Transformer <input type="checkbox"/> Upgrade to TOU <input type="checkbox"/> Y <input type="checkbox"/> N	Service Size 100A <input type="checkbox"/> 200A <input type="checkbox"/> 400A <input type="checkbox"/> Other..... A	Number of Installations Single Installation <input type="checkbox"/> Multiple Installation <input type="checkbox"/> Number of House Services <input type="text"/> Number of Units <input type="text"/>	Premise Type Domestic <input type="checkbox"/> Torrens <input type="checkbox"/> Strata <input type="checkbox"/> Commercial <input type="checkbox"/> Builders Service Perm <input type="checkbox"/> Special Small Service (Indicate type of SSS below) <input type="checkbox"/> Other	Supplementary AFC If the installation is one of the following types you must also complete and attach the Supplementary Application for Connection . New electrical work over 20kW <input type="checkbox"/> Services greater than 100 Amps <input type="checkbox"/> CT metered installations (CT Metering Form MUST be submitted) <input type="checkbox"/> HV installations requiring more than of additional load <input type="checkbox"/> Multiple living unit developments (more than six units) <input type="checkbox"/> Installations located in rural or outlying <input type="checkbox"/> Work where the proposed equipment may cause excessive fluctuation of voltage (eg welders, x-ray machines) <input type="checkbox"/> Equipment > 75A per phase (Power Quality Form MUST be submitted) <input type="checkbox"/> Grid Connected Generation System (Gross or Net Metered) <input type="checkbox"/>
--	---	--	---	---	--

Calculated Maximum Demand in Each Phase (Amps)

A B C

Proposed Service Length

Existing Existing Service Rating

Details of Job: _____

