Central Power Distribution Company of A.P. Limited

ABIOP Operation North ASS THE METERIES A RATE COSTAPPIICATION FOR Supply of	Circle, Hyderabad f Electricity at Low Tension
Name of the Section	
Name of the Sub Division:	
Name of ERO :	
REGISTRATION No.	
Date of Registration :	Affix the
Location Code :	Passport Photo of Applicant
То	***
(Designated Officer) I/We request you to supply electricity at Low Tension	on to my/own Premises as mentioned below:
1. (a) Name of the applicant in whose name continuous	onnection is required
First Name :	
Middle Name :	
Surname :	
(b) Father's / Husband's Name:	
2. (a) Location of Premises where supply is r	equired:
House Number :	Mandal :
Street :	Village : Pin code :
District :	and the state of t
(b) Neighbouring / Nearest Service Connectio	n nomber.
(c) Nearest Land Mark:	
(d) Type of Service Wiring	
1. Over Head Under Gro	
2. Type of entry: Enclosed in PVC Cond	, , , , , , , , , , , , , , , , , , ,
G.I. Pipe:	
3. Is the pipe externally visible :	Yes No
(e) Is wiring in the Premises completed: The details are as follows (If yes):	
Name of the Licensed Electrical Contracto	or
Licence Number	
Full Address	

(b) Are any other services existing in the same Premises: Yes No If yes, please give Service Connection Numbers of those Services Service Connection Number: Category (g) Harry other services are existing elsewhere in the same name or in the names of sister conciling the services If yes, please give the details of those services Service Connection Number Category Lossition If yes, please give the details of those services Service Connection Number Category Lossition Address and Telephone Number for communication Address and Telephone Number for communication Address and Telephone Number for communication Address Address Telephone Number If yes, please give the details of those services Service Connection Address Address Address Address Address For Industrial/Agricultural Services/ Street Lights/General Purpose/ Street Lights/General Purpose/ Street Lights/General Purpose/ Appliance Nos.* Actegory Industrial of Purposed Connected Load Address Nos.* Actegory Nos.* Actegory Nos.* Actegory Industrial of Purposed Connected Load N					£ 13.					
Service Connection Number Category		(f) Are a	ny other serv	ices existing in	the s	same Pr	emises : Yes		No I	
Service Connection Number Category		If yes, ple	ase give Sen	vice Connection	n Nui	nbers o	f those Service			. 1
(g) If any other services are existing elsewhere in the same name or in the names of eister coocciliates of those services. Service Connection Number Category Location						. 1				
Service Connection Number Category Location	: .:							itegory		,
Service Connection Number Category Location					:]		1		
Service Connection Number Category Location		(g) If any	other service:	s are existing el	sewh	ere in th	ne same name	or in the n	ames of sistor	2022
if yes, please give the details of those services Service Connection Number Category Location								01 111 (1)(-1)	iames of Sister (conce
Service Connection Number Category Location			, ,	ا لنبا	, ,				•	
3) Address and Telephone Number for communication Address Telephone Number e-mail address if any Address Telephone Number e-mail address if any Additional Load HP 5) Connected Load Requested : KW		lf.yes,	please give t	the details of th	ose	services	3			
3) Address and Telephone Number for communication Address Telephone Number e-mail address if any Additional Load 5) Connected Load Requested : KW HP 6) Details of Proposed Connected Load For Industrial/Agricultural Services/ Street Lights/General Purpose/. Temporary: Supply Details of Nos.* Appliance Nos.* Appliance Nos.* Appliance HP/KVA Load Motors Welcing sets Heaters		S	ervice Conne	etion Number		, C	ategory		Location	
Address Telephone Number e-mail address if any 4) Type of Service required (Please tick the Service applicable): New Connection Additional Load			•		.			·		
Address Telephone Number e-mail address if any 4) Type of Service required (Please tick the Service applicable): New Connection Additional Load		<u> </u>				7.7		<u> </u>	· ·	
4) Type of Service required (Please tick the Service applicable) New Connection Additional Load	3)	Address and Te	lephone Nur	nber for comm	unic	ation				:
4) Type of Service required (Please tick the Service applicable) New Connection			Addres	s		· .]. T	elephone Numi	ner la	-mail addraga is	
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New Connection Additional Load Additional Load For Industrial/Agricultural Services/ Street Lights/General Purpose/. Temporary Supply Total Load Private Lights Fans						` <u>*</u> _^		·		
New Connection Additional Load Additional Load For Industrial/Agricultural Services/ Street Lights/General Purpose/. Temporary Supply Total Load Private Lights Fans	. 4)	Type of Service	required /Pla	1000 tiels the 0		 				
Additional Load 5) Connected Load Requested : KW	-1 7			ase tick the S	ervic	e applic	cable)			
6) Details of Proposed Connected Load For Domestic/Commercial Establishments Details of Nos. Appliance Nos. Appliance Nos. Wattage of each Wattage each Welting		New Connec	tion	•				:		
For Domestic/Commercial Establishments Details of Appliance Nos. Appliance Wattage of each Wattage each Wattage of Electric furnaces Elec	. [Additional Lo	ad	3		••		1.		
For Domestic/Commercial Establishments Details of Appliance Nos. Appliance Wattage of each Wattage each Wattage of Electric furnaces Elec		.			Г	. .				
For Industrial/Agricultural Services/ Street Lights/General Purpose/. Temporary Supply Details of Appliance Wattage of each. Lights Motors M	s) (connected Load	Requested:	KW	HP				•	
For Industrial/Agricultural Services/ Street Lights/General Purpose/. Temporary Supply Details of Appliance Wattage of each. Lights Motors M	6) r	netails of Propos	ed Connecte			•				
Street Lights/General Purpose/. Temporary Supply	,		•			. ,	or Industrial/A	gricultura	al Services/	
Details of Appliance Wattage of Wattage each. Lights Motors. Fans Welding sets Heaters Heaters Heaters Grinder Mixer Grinder Washing Machine Electric furnaces Battery chargers Mixer Lights & Fans Total Load Existing Load Addi Load Total Load Seyser Water Pump Cooking Range Plugs Others Total Load Existing Load Addi. Load Total Load Service Applicable): Total Load Bexisting Load Addi. Load Total Load Service Applicable): Total Load Bexisting Load Addi. Load Total Load Service Applicable): Total Load Bexisting Load Addi. Load Total Load Service Applicable): Total Load Bexisting Load Addi. Load Total Load Service Applicable): Total Load Bexisting Load Addi. Load Total Load Service Applicable): Total Load Bexisting Load Addi. Load Total Load Service Applicable): Total Load Bexisting Load Addi. Load Total Load Bexisting Load Addi. Load Total Load Bexisting		For Domest	ic/Commercia	al.			Street Lights/	'General f	Purpose/.	
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Battery chargers Lights & Fans Total Load Existing Load Add Load Total							**			
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Plugs Others Total Load Existing Load Addl. Load Total Load 7) Status of Applicant (Please tick the service Applicable): Individual								_		
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Total Load										
Existing Load Addl. Load Total Load Total	ļ				H.F	ELFACE	AE/CIP	-		
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Total Load			· · ·		TA E	Thirty	THE ROOM	ZTUTES BANK	ISF to a	
7) Status of Applicant (Please tick the service Applicable): Individual										
☐ Individual ☐ Registered Partnership ☐ Unregistered Partnership ☐ Public Limited Company ☐ Private Limited Company ☐ Government Institutions ☐ Endownment / Wakf ☐ Any Other				-			•	•	٠.	
Unregistered Partnership Public Limited Company Private Limited Company Government Institutions Endownment / Wakf Any Other	7) Stat		Please tick t	he service Ap	plica	ble):				
Private Limited Company Government Institutions Endownment / Wakf Any Other		Individual			}		Registered Par	tnership		
Private Limited Company Government Institutions Endownment / Wakf Any Other	·	Unregistered Pa	rtnership			\Box	Public Limited	Compositi		- 1
Endownment / Wakf Any Other		· · · · · · · · · · · · · · · · · · ·			+			··		
	. [Private Limited	Company	• -	<u> </u>		Government In	stitutions		
		Endownment/V	Vakf		_		Any Other	<u> </u>		
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	SC ST		Others
ategory o	ے of supply (Please tick the Category A	—— .pplie	id for) :
Category	Туре		Category Type
T-I	Domestic	- ⊦	LT-V Agriculture
.T-11	Non-Domestic	1	LT-VI (A) Street Lighting
	Commercial	┦. [LT-VI (B) PWS Scheme
T-İI (C)	Advertisement Hoardings	₫. [LT-VII (A) General Purpose
⊤ भेग,	Industry	_ [LT-VII (B) Religious Purpose
T-IV	Cottage Industry		LT-VIII Temporary Supply
Details o	of Application fee paid :		
		Bank	drawn on Demand Draft Date
		a	
Supporti	ing documents enclosed (Please tid	ck wh	nere applicable):
Categor			Supporting Documents to be furnished
Commo	on to all LT categories except rcial & Industrial		Completed & signed Application Form along with the Signed Declaration
	.		Proof of Ownership (Sale deed, Allotment/possession lease deed, Municipal tax payment tax payment receipt) or Proof of occupancy (Lease/Rental deed with landlord, Electoral identify card or Passport or PAN card along with proof owner hip of land lord)
		T T	Indemnity Bond (Letter of consent from landlord to tenant/lessee/ occupier) Wiring Completion Report (from a licensed electrical contractor)
			Test Report Demand Draft for new connection charges
Commer	rcial		In addition to the above Valid municipal license for running commercial establishment
Industria	l .	· [In addition to the above Valid industrial license
Additiona	al Documents to be provided		
SC or ST	Г	- 1	Necessary community certificate enclosed.
Partnersh	hip	İF	Location, Head office, names & address of Partners & copy of partnership deed enclos
Company	1	C.	Name of Present Directors & Copy of Memo dum of Articles of Association enclosed
)	<u> </u>		Indemnity Bond and Declaration

12. Undertaking:

- i. I/We undertake and agree to pay the Tariff and Miscellaneous charges. Prescribed by the Company and to abide by the General Terms and Conditions of Supply notified by the Companion time to time, which shall govern the supply of electricity to me/us in all respects.
- ii. I/We shall undertake to execute an Agreement in the prescribed form, if so called upon by the Company. Whether such an Agreement is executed or not, this application itself shall oblig me/us to conformed abide by the General Terms and Conditions of Supply notified by the Companion time to time.
- iii. I/We certify that I have no dues to the Company either here or anywhere.
- iv. I/We certify that there is no case of Theft of Electricity/Unauthorized Use of Electricity, pending against me.
- v. I/We undertake and agree for recorvery from the excess paid amounts, if any against services found to be under disconnection or services with or Unauthorized Use of Electricity cases or Theft of Electricity cases found, and also against services clubbed for being in the same premises.
- vi. I/We undertake to provide suitable arrangements for 'way leave' at my/our own cost.
- vii. I/We request to company to provide meter for measuring the electricity supplied to me/us. I/We will pay the monthly meter rentals, as may be fixed by the Commission from the time to time.
- viii. I/We undertake that I shall provide the visible service wiring upto the metering point without concealed wiring.
- ix. I/We undertake to pay the required amounts, if any extension of LT / HT network is required. Further, I will take up the work (Please tick where applicable)

	Through Deparment .	On Turn Key
Signature of Applicant		Signature of Original Owner
Place		(In case of title transfer)
Signed by the applicant in my pres Vitness 1 Signature :	Wit	Date tness 2
	Sigr	nature :
Name and Address :	Nam	ne and Address :
Date:	.Date:	

(For Office purpose only)

RECORD OF THE APPLICATION

1. Sent to AE/Operation on	
2. Work allocated to	
a) Separate portion	Yes/No.
b). No OSL/UDC/TE/UUE/BB premises	Yes/No
c). Connected load is same as declared	Yes/No
d). Whether Service wire is Concealed	Yes/No
e). HT & LT Clearances maintained	Yes/No
f). Whether any Overhead lines are	Yes/No
passing over the house/Premises	•
h). T/F Code /Feeder Code	
i). T.C. Seal No: P.P.Box Seal No.	
Impressio	n:
1. Received from the Designated Officer al	ong with Test Report on
2. SC. No	
	•
	· · · · · · · · · · · · · · · · · · ·
ACKNOWLEDGEMENT OF APPLICATION AND I	NTIMATION OF PAYMENT DETAILS
	Date of Submission of
Designated Office	Date of Submission of
	Application/Registration
Registration No.	Signature of the Receiving
<u> </u>	Officer with Stamp
Total Payment Received	•
Total rayment Received	
	Signature of