## **APPLICATION FOR TRANSFER**

ACCOUNT NUMBER:				
NAME:				
SERVICE ADDRESS:				
DIRECTIONS:				
CONTACT TELEPHONE NO'S: (H) (W) (C)				
PLEASE TICK THE RELEVANT BOX				
Inside House Temporary Supply Service Line				
Relocation of House Alteration of Extension of Building				

<sup>&</sup>quot;All Correspondences should be addressed to the General Manager"

## CSD-AT001

Other:			
APPLICANTS NAME (Block Letters)		APPLICANTS SIGNATURE	
	DATE	<u> </u>	
Customer Service Rep/Receiving Of	ficer	DATE	•

Please be advised that an appointment must be made with the technical department before any wok is carried out.

TRANSFERS ARE SUBJECT TO A CHARGE OF \$100.00