

Annexure - 11.6

Application form – Conversion of Services / Change of Consumer Category / Shifting of Connection

(Tick the applicable purpose)

1	Service Connection No.	:	
2	Consumer No.	:	
3	Name of Consumer	:	
4	Consumer category	:	
5	Contracted load	:	
6	Address	:	
7	Telephone no.	:	
8	Request for change in service:		
i)	If request is for conversion of service: <i>(Tick whichever applicable)</i>		a) Conversion from LT single phase to LT 3-phase b) Conversion from LT 3-phase to LT single phase c) Conversion from LT to HT d) Conversion from HT to LT e) Conversion from HT to EHT f) Conversion from EHT to HT g) Other <i>(Please specify)</i>
ii)	If request is for change in consumer category, mention the tariff category to which Consumer		<i>(See list of all tariff categories attached with this form)</i>
iii)	If request is for change in premises:		Details of equipment to be shifted (Meter/service line, LT/HT line, transformer, etc.):
8	Reason for change in service	:	

Note: The following documents are attached with the application form: *(Tick whichever applicable)*

1. Installation inspection report by the Electrical Inspector
2. Any other document *(please specify)*

Date: _____

Place: _____

Signature of the Consumer

Name: