

Application form – Change in Name of Registered Consumer

1	Service Connection No.	
2	Name of Registered Consumer (at present)	
3	Consumer category	
4	Contracted load	
5	Address:	
		Telephone no.: Mobile: Email
	Name of the person in whose name connection to be changed (in CAPITAL LETTERS)	

Note: The following documents are attached with the application form:

(Tick whichever applicable)

1. Copy of latest bill duly paid
2. Proof of ownership / legal occupancy of premises
3. No Objection Certificate from the existing consumer if available/possible.
4. Registered deed/ Succession certificate/ _____ (if any other document, please specify)

Date: _____

Signature of the Consumer

Place: _____

Name:

Acknowledgement

Application form of Service Connection No. _____ at present in the name of _____ (name of applicant) has been received on _____ (date) for changing the name of Consumer to _____.

In this regard, the consumer is given a reference no. _____ to be used for all future correspondence.

Signature / Seal of Licensee's representative
Name and Designation: