

CENTRAL POWER DISTRIBUTION COMPANY OF A.P. LIMITED
Customer Service Centre
OPERATION CENTRAL CIRCLE, HYDERABAD
APPLICATION FOR SUPPLY OF ELECTRICITY AT LOW TENSION

Photo of the consumer

For New Loads / Addl. Loads

To,
 The Asst. Engineer / Operation

I/We request you to supply electricity at L.T. to my premises as mentioned below

1. Name of the Customer in whose name connection is required.

2(a). Location of premises where supply is required:

Street:	Mandal:
Village:	District
	Pin Code:

(b). Nearest electrical pole number

(c). Type of service writing

1. Over Head Under ground

2. Type of entry: Enclosed in PVC Conduit Yes No G.I. Pipe Yes No

3. Is the pipe externally visible Yes No

(d) Is wiring in the premises completed Yes No

(e) If any other services existing in the same premises Yes No
 if yes, please give S.C. Nos. of them

SC. No.	Category

(f). If any other services existing elsewhere in the same name or in the name of sister concern if, Yes, details thereof

 Yes

 No

SC.No.	Category

3. Address for communication with Telephone No.

Address	Telephone No.

4. Details of connected load
Domestic / Commercial load

For Industries/agriculture Services/
Street Light / Temporary Supply

Details of Appliances	Nos. X Watts	Total Watts
Lights		
Fans		
Fridge		
Mixer		
Grinder		
Washing Machine		
Electric Iron		
A.C.		
Geyser		
Water Pump		
Cooking Range		
Plugs		
Others		
Total Load		
Existing Load		
Addl. Load		
Total Load		

Details of Appliances	Nos. X Watts	Total Watts
Motors		
Welding sets		
Battery Chargers		
Lights & Fans		
Total Load		
Existing Load		
Addl. Load		
Total Load		

5. Status of Customer: Individual

Registered Partnership

Unregistered Partnership

Public Ltd. Company

PVT. Ltd., Company

Any others

6. Social Group:

SC

ST

Others

7. Category of supply

Category	Type	Tick
Cat-I	Domestic	
Cat-III	Industrial	
Cat-V	Agriculture	
Cat-VII	General Purpose	

Category	Type	Tick
Cat-II	Non-Domestic	
Cat-IV	Cottage industry	
Cat-VI	Street Lights	
Cat-VIII	Temporary Supply	

8. Connected load: KW HP

9. Details of Application fee paid
(fee payable: Rs. 25 for Cat- I & V
Rs.50 for other categories)

D.D. for Rs.	D.D.No.	D.D.Date

10. Tick (✓) whichever is applicable:

S.C. or S.T.	Necessary community certificate enclosed.
Partnership	Location, Head office, names & address of Partners & copy of Partnership deed enclosed.
Company	Name of Present Directors & Copy of Memorandum of Articles of Association enclosed.

11. Undertaking:

- i. I / We undertake and agree to pay the Tariff and Miscellaneous charges prescribed by the APCPDCL and abide by the terms and conditions of supply notified by the APCPDCL from 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 APCPDCL whether such an agreement is executed or not, this application itself shall oblige me / us conform to and abide by the terms and conditions of supply notified by the APCPDCL from time to time.
- iii. I / We certify that I have no dues to the company either here or any where.
- iv. I / We certify that there is no theft of energy / Malpractice / Back Billing Case pending against me.
- v. I / We certify that the application is filled for a separate portion for a separate activity (i.e. Kitchen in case of Domestic).
- vi. I / We undertake for recovery from the excess paid amounts, if any services are found to be under disconnection or service with arrears or meters not existing cases or Malpractice cases of pilferage found and also if no separate portion is existing.

Signature of Applicant Date

(For office purpose only)

RECORD OF THE APPLICATION

1. Sent to AE / Op on

2. Work allocated to

a) Separate Portion Yes / No

b) No OSL / UDC / PE / MP / BB / premises Yes / No

c) Connected load is same as declared Yes / No

d) Service wire is not Concealed Yes / No

e) HT & LT Clearances maintained Yes / No

g) T / F code / Feeder Code

h) T.C. Seal No. P.P. Box Seal No.

with impression:

Signature

3. Received from AE/OP along with test report on _____

4. S.C.No. _____

Signature

ACKNOWLEDGEMENT

SECTION / CSC

DATE OF REGISTRATION

REGISTRATION NO.

SIGNATURE OF
RECEIVING OFFICER
WITH STAMP