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## APPLICATION FOR THE DISCONNECTION OF ELECTRICITY SERVICES

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### Stand / Erf Detail

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\* Account \*Stand / Erf no.

\* Street Address (To be disconnected) Shop / Flat Number Unit Number

Building / Flat Name

\* Town / Ward Master Acc no. (Group Acc):

\* Disconnection Date \* Are you the? (tick applicable)

Owner  Tenant

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### Customer Detail

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\* Surname or Name of Business

\* First name \* Initials

\* Identity Number / Passport

Initials of Spouse Identity Number (Spouse)

Telephone Numbers

\* Home Work \* Mobile

\* Current Postal Address

## Forwarding detail

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\* New Residential Address

New Postal Address

Name & Address of Future/ Present Employer

Name & Address of Future/ Present Employer

\* Signature: Applicant

\* Date

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FOR OFFICE USE ONLY

### Customer Care:

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Checklist Final Update: (Tick when completed)

Confirmed Forwarding Address	Deposit Drawn in	Levies Updated	Final Readings possessed	Checked by Signature
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Please confirm that this meter is connected to the said erf /unit (sign)

Meter number

Meter Readings

Prepared by

Controlled by