



TEL +264 (64) 214 600 FAX +264 (64) 214 601 EMAIL info@erongored.com.na
 ERONGO RED BUILDING REG NO 2004/074 91 HAGE GEINGOB STREET P O BOX 2925 WALVIS BAY NAMIBIA

APPLICATION FOR CIRCUIT BREAKER CHANGE

Stand / Erf Detail

* Stand / Erf no.

* Street Address (To be connected)

* Town / Ward

Account No.

Shop / Flat Number

Unit Number

Building / Flat Name

Master Acc no. (Group Acc)

* Are you the? (tick applicable)

Owner	<input type="checkbox"/>	Tenant	<input type="checkbox"/>
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Connection Detail

* Connection Required for (tick applicable)

Domestic	<input type="checkbox"/>
Business	<input type="checkbox"/>
Other	<input type="checkbox"/>

Bulk (tick appropriate unit)	<input type="checkbox"/>	Amps	<input type="text"/>	kVA	<input type="text"/>
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* Size of Connection Required

Single Phase Max	20 Amp	<input type="checkbox"/>
	30 Amp	<input type="checkbox"/>
	40 Amp	<input type="checkbox"/>
	50 Amp	<input type="checkbox"/>
	60 Amp	<input type="checkbox"/>

Three Phase	25 Amp	<input type="checkbox"/>
	40 Amp	<input type="checkbox"/>
	60 Amp	<input type="checkbox"/>
	70 Amp	<input type="checkbox"/>
	80 Amp	<input type="checkbox"/>

Rural (Farm)	Up to 25 Amp	<input type="checkbox"/>
	50 Amp	<input type="checkbox"/>
	75 Amp	<input type="checkbox"/>
	kVA	<input type="text"/>
	kW	<input type="text"/>

Required Connection

* Connection Date

* **Connection Required for** (tick applicable)

Domestic	<input type="checkbox"/>	Business	<input type="checkbox"/>
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Other	<input type="checkbox"/>
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Rural (Farm)	Up to 25 Amp	<input type="checkbox"/>
	50 Amp	<input type="checkbox"/>
	75 Amp	<input type="checkbox"/>
	kVA	<input type="checkbox"/>
	kW	<input type="checkbox"/>

* **Size of Connection Required**

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	50 Amp	<input type="checkbox"/>
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Three Phase	25 Amp	<input type="checkbox"/>
	40 Amp	<input type="checkbox"/>
	60 Amp	<input type="checkbox"/>
	70 Amp	<input type="checkbox"/>
	80 Amp	<input type="checkbox"/>

Bulk (tick appropriate unit)	Amps	<input type="checkbox"/>	kVA	<input type="checkbox"/>
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Application detail

* Title (Mr, Mrs, Miss, Dr, Messers)

* Surname of Applicant

Maiden name

Telephone Numbers

*Home

Email

Payment method

Cash/ Cheque	<input type="checkbox"/>	Debit Order	<input type="checkbox"/>
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Company Reg. no.

* Postal Address

* Previous Residential Address

* Occupation

Employee Number

* First Name and Initials of Applicant

* Identity Number / Passport no.

* Nationality

* Mobile

Fax

Vehicle Reg. no.

* VAT no. (Mandatory if Business)

Street Address

Employer Name

Telephone Code & Tel. no.

Declaration by Owner/Tenant

Owner	
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Tenant	
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A. I, the undersigned, and owner/s of this property understand and accept the conditions of this agreement. I undertake to pay the full balance and interest on all arrears calculated monthly at a rate of prime plus 2% p.a., should the tenant/occupant applying for this and any other service fail to uphold their agreement with Erongo RED. In the event that Erongo RED should incur costs to recover any arrear amounts from the tenant/occupant or me, I undertake to be responsible for such costs. I declare that the information provided by me is correct, and that I do not object having the service, applied for in this application, supplied to the mentioned address. I further confirm that I took note of the General Conditions as set out in this Application.

B. I, the undersigned, hereby bind myself as surety and co-principal debtor in solidium with the applicant in favour of the supplier in respect of any amount that may now or in the future be due and owing by the applicant to the supplier. In respect of any cause arising out of this document, I hereby renounce the benefits of excursion and division and choose as my domicilium citandi et executandi for the purpose of this surety ship my address as set out in this document.

.....
*Signature

.....
*Date

Consent of Owner/s

A. I, the undersigned, and owner/s of this property understand and accept the conditions of this agreement. I undertake to pay the full balance and interest on all arrears calculated monthly at a rate of prime plus 2% p.a., should the tenant/occupant applying for this and any other service fail to uphold their agreement with Erongo RED. In the event that Erongo RED should incur costs to recover any arrear amounts from the tenant/occupant or me, I undertake to be responsible for such costs. I declare that the information provided by me is correct, and that I do not object having the service, applied for in this application, supplied to the mentioned address. I further confirm that I took note of the General Conditions as set out in this Application.

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* Name

* Signature

* Name

* Witness

* Date

* Date

Documents Required

1. Copy of I.D
2. Owner's Signature important if Agent Power of Attorney and Stamp

Customer Care

Checklist Final Update (Tick when completed)

<input type="checkbox"/> Meter number	<input type="checkbox"/> Ampere	<input type="checkbox"/> Readings	Confirmation ErongoRED (Sign)
_____	_____	_____	_____

.....
Prepared by Date Checked by Date
.....

* *Compulsary fields, must be completed*