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APPLICATION FOR THE DISCONNECTION OF ELECTRICITY SERVICES

Stand / Erf Detail

* 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

Customer Detail

* 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

* New Residential Address

New Postal Address

Name & Address of Future/ Present Employer

Name & Address of Future/ Present Employer

* Signature: Applicant

* Date

FOR OFFICE USE ONLY

Customer Care:

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