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ERONGO RED BUILDING REG NO 2004/074 91 HAGE GEINGOB STREET P O BOX 2925 WALVIS BAY NAMIBIA

SOCIAL TARIFF APPLICATION FORM

UP TO 20 LIFELINE TARIFF

This application form applies only where the applicant is an Erongo RED Customer

This form must be completed by the applicant and lodged with Erongo RED at least thirty (30) days prior to billing of first electricity account to which the rebate will apply. Please refer to the information brochure before completing this application. Further assistance is available from Erongo RED Staff

CUSTOMER DETAILS

Name:

Surname:

Identity Document Number:

*Telephone Numbers:

Work:

Mobile:

Email:

*Postal Address:

Prepaid Electricity only:

Up to 20 Amp only:

Meter Number:

Home:

Fax:

*Street Address:

I Hold a Municipal property valuation for : (Please tick appropriate box)

WALVISBAY - From N\$0.00 - N\$300 000.00
SWAKOPMUND - From N\$0.00 - N\$300 000.00
HENTIESBAY - From N\$0.00 - N\$150 000.00
ARANDIS - From N\$0.00 - N\$150 000.00

USAKOS - From N\$0.00 - N\$150 000.00
KARIBIB - From N\$0.00 - N\$150 000.00
OMARURU - From N\$0.00 - N\$150 000.00
UIS - From N\$0.00 - N\$150 000.00

CUSTOMER DWELLING INFORMATION

I Live: (Please tick ALL the boxes that apply to your circumstances)

- Alone
- With Spouse and /or other people that are solely dependent on me
- With people who provide care and assistance , and who DO NOT pay my rent
- With anyone else that is not mentioned above, please give details

DECLARATION

1. I advise that the above address is my principal place of residence for which the rebate is claimed by me and the above electricity account is solely or jointly in my name and/or for which I have a lease agreement in my name.
2. I will notify Erongo RED immediately of any change in my circumstances , which may affect my eligibility for the rebate.
3. I Consent Erongo RED to confirm my eligibility with the local Municipality or Local Authority regarding the Property Valuation.
4. I declare that all the information that I have given is true and correct.
5. Erongo RED is hereby authorised to reverse any electricity benefits accrued to me, the moment that Erongo RED finds out that my situation and connection no longer complies with the conditions under which these benefits were granted.
6. Erongo RED reserve all rights to cancel this special tariff at any time at its own discretion without any reason.

Signature of Applicant: Date:

FOR OFFICE USE ONLY

Date received:	<input type="text"/>			
Received by:	<input type="text"/>	Signature:	<input type="text"/>	Date: <input type="text"/>
Verified by Senior Customer Care:	<input type="text"/>	Signature:	<input type="text"/>	Date: <input type="text"/>
Approved by Senior Customer Care:	<input type="text"/>	Signature:	<input type="text"/>	Date: <input type="text"/>