



TEL +264 (64) 201 9000 FAX +264 (64) 201 9001 EMAIL support@erongored.com.na  
ERONGO RED BUILDING REG NO 2004/074 91 HAGE GEINGOB STREET P O BOX 2925 WALVIS BAY NAMIBIA

## SOCIAL TARIFF PENSIONER & DISABILITY APPLICATION FORM

**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

(Please tick appropriate box)

New Registration  Re-Registration

### ***PENSIONER / DISABLED PERSON'S DETAILS***

Name:

Surname:

Identity Document Number:

Contact Number:

Postal Address:

PRE-PAID METER NO:

CONVENTIONAL ACCOUNT NO:

CONVENTIONAL METER NO:

ERF No:

E-mail Address:

I am a recipient of one of the following:

(Please tick  appropriate box)

MONTHLY PENSION (Government or Private)

DISABILITY GRANT

Alternatively I am in possession of an:

ID DOCUMENT SHOWING AGE 60 OR MORE

## **PENSIONER / DISABLED PERSON'S DWELLING INFORMATION**

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

- Alone
- With Spouse and /or people that are solely dependent on me
- With other people who receives a pension and /or disability grant
- 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.
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 Ministry of Labour and Social Welfare, Ministry of Health and Social Services.
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 bene-fits 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:

---

---

### **ATTACHMENTS / SUPPORTING DOCUMENTS REQUIRED:**

- Application form for Social Tariff Application, duly completed & signed by applicant.
- Clear I.D copy of Applicant.
- If the applicant is a Tenant, a Lease Agreement must be attached, duly signed by both the Tenant and the Landlord.
- If the applicant is the Owner, proof of ownership must be provided. Even if the applicant is the owner on the system, proof of ownership still needs to be provided with first time registration.
- If the applicant receives a pension payout every month or a disability grant, registration letter from the Ministry of Social Welfare or the Pension institution should be attached with first time registration.
- Social tariff registrations is renewable every year. This should be communicated to the applicant on initial application.