



ELECTRIC DEPARTMENT
REQUEST FORM FOR ELECTRIC CONNECTION/METER

DATE:	
REF:	

This form is used for the application of new electricity connection/meter under the rules and regulation of **TopCity-1**. Please fill the form accurately to enable us to progress your application as quickly as possible. Insufficient information will lead delay.

APPLICANTS PARTICULARS

ALLOTMENT REF#			
FULL NAME			
FATHER/HUSBAND		CONTACT NUMBER:	
CNIC NUMBER			
ADDRESS			

CORRESPONDING PERSON INFORMATION	NAME	
	CNIC#	
	CONTACT NO#	

TOPCITY-1 CONNECTION DETAIL

BLOCK#		STREET#		PLOT#	
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TYPE OF PROPERTY Residential 5 Marla 10 Marla 1Kanal
Commercial Apartment Mini commercial Shopping mall/Building
Public _____ OTHERS:

Standard connection only give load of 8 kva with variance +/-5% if your load requirement is more or require three phase connection then you need to apply for separate transformer.

TYPE OF CONNECTION REQUIRED standard 8kv connection with meter 3 Phase connection with transformer

PLEASE ALL UPTO 7WORKING DAYS FOR YOUR NEW CONNECTION/MERTER INSATLLED

Before you submit your application please ensure that you have enclosed all relevant Information which allow us to process your application as quickly as possible

_____ signature

NOTE: if the information above is not completed there may be delay in processing your request

(FOR INTERNAL USE OF ELECTRIC DEPARTMENT ONLY)

DATE REQUEST RECIVE _____	NO OF DAYS REQUIRED <input type="text"/>
DATE WORK, HAND OVER _____	

I certified that all supporting documents/particulars found correct

_____ Signature

_____ DESIGN WING	_____ QA/QC HOD	_____ CAQ
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