

**ENERGY DEPARTMENT
ALBERTON - DEPOT**

SWARTKOPPIES & MICHELE AVE, RANDHART.

FAX: 011 861 2048, TEL: 011 999 2314, Johannes.Moremi@ekurhuleni.gov.za



Ekurhuleni
METROPOLITAN MUNICIPALITY

**APPLICATION FOR THE RETROFITTING OF A CREDIT METER TO A PREPAYMENT METER,
EQUAL TO OR BELOW 100 AMPERE, 230 VOLT OR 400 VOLT**

OWNER DETAIL:	
NAME / COMPANY NAME: <input style="width: 300px;" type="text"/>	TITLE: MR, MS, OTHER SPECIFY <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/>
RSA IDENTIFICATION : <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> OR PASSPORT NUMBER <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/>	
BUSINESS VAT NUMBER IF APPLICABLE: <input style="width: 100px;" type="text"/>	ACC NO.: <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/>
TENANT DETAIL IF APPLICABLE:	
NAME / COMPANY NAME: <input style="width: 300px;" type="text"/>	TITLE: MR, MS, OTHER SPECIFY <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/>
RSA IDENTIFICATION : <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> OR PASSPORT NUMBER <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/>	
BUSINESS VAT NUMBER IF APPLICABLE: <input style="width: 100px;" type="text"/>	ACC NO.: <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/>
IF TENANT, COPY OF CONSENT LETTER FROM OWNER AND COPY OF OWNER'S ID:	YES <input type="checkbox"/> NO <input type="checkbox"/>
APPLICANT CONTACT DETAILS:	
CELL: <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> OFFICE: <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> OTHER: <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/>	
E-MAIL: <input style="width: 100px;" type="text"/>	
PREFERRED METHOD OF COMMUNICATION: E-MAIL <input type="checkbox"/> SMS <input type="checkbox"/> BOTH <input type="checkbox"/>	
POSTAL ADDRESS: <input style="width: 100px;" type="text"/>	Code: <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/>
PROPERTY DETAIL FOR WHICH ELECTRICAL CONNECTION IS REQUIRED:	
ERF / STAND NO.: <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/>	PORTION (IF APPLICABLE): <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/>
STREET NUMBER: <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/>	STREET NAME: <input style="width: 100px;" type="text"/>
TOWNSHIP: <input style="width: 100px;" type="text"/>	NO. OF RESIDENTIAL UNITS OF STAND (FOR DEVELOPMENTS): <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/>
APPLICATION TYPE - RETROFIT CONVENTIONAL METER TO PREPAYMENT METER	
EXISTING CONNECTION SIZE (SAME SIZE PREPAYMENT METER WILL BE INSTALLED AS CREDIT METER) MARK WITH AN "X"	
VOLTAGE: 230V (SINGLE PHASE) <input type="checkbox"/>	400V (THREE PHASE) <input type="checkbox"/>
CIRCUIT BREAKER SIZE: 20A <input type="checkbox"/>	40A <input type="checkbox"/> 60A <input type="checkbox"/> 80 A <input type="checkbox"/> 100A <input type="checkbox"/>
TARIFF CHOICE (RESIDENTIAL) MARK WITH AN "X"	
<input type="checkbox"/>	1 - TARIFF A - (IBT) - AVAILABLE UP TO 80 AMPERE 400 VOLT (RESIDENTIAL)
<input type="checkbox"/>	2 - TARIFF B - RESIDENTIAL - RESTRICTED TO 100 AMPERE FOR PREPAYMENT
TARIFF CHOICE (BUSINESS) MARK WITH AN "X"	
<input type="checkbox"/>	1 - TARIFF A - BUSINESS - AVAILABLE UP TO 80 AMPERE 400 VOLT
<input type="checkbox"/>	2 - TARIFF B - BUSINESS, MIXED BUSINESS AND RESIDENTIAL, COMMERCIAL OR INDUSTRIAL RESTRICTED TO 100 AMPERE FOR PREPAYMENT
<p>I _____ being the applicant (owner / tenant) hereby acknowledge that I have applied for the above electricity supply connection and that I have received the advice letter on the new prepayment meter operation and I have been informed of the choice of tariffs and a copy of the cost has been provided to me. I also acknowledge that I am aware that the 40 kWh preloaded units will be allocated to an "arrears account" to my prepayment meter and it will be recovered with the first monetary prepayment transaction.</p>	
SIGNATURE: <input style="width: 150px; height: 30px;" type="text"/>	DATE: <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> - <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> - <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/>
FOR OFFICE USE:	
To be archived in Stand File: _____	
Approved: Yes <input type="checkbox"/> No <input type="checkbox"/>	Advisory letter issued to applicant: Yes <input type="checkbox"/> No <input type="checkbox"/>
Assisted by Council's Official - Name: <input style="width: 100px;" type="text"/>	
Designation: <input style="width: 100px;" type="text"/>	