

**ANNEXURE 4**  
**REGULATION 8(1) OF THE ELECTRICAL INSTALLATION REGULATIONS ( EIR ),**  
**2009 NOTICE OF COMMENCEMENT OF INSTALLATION WORK**

1) TO BE COMPLETED BY OWNER'S INSTALLATION ELECTRICAL CONTRACTOR

2) THIS WILL FORM PART OF THE APPLICATION

**3) THE APPLICATION WILL NOT BE APPROVED WITHOUT THIS COMPLETED  
NOTICE OF COMMENCEMENT OF INSTALLATION WORK DOCUMENT.**

*OWNER TO TAKE NOTE THAT THE HOUSE WIRING CAN ONLY BE INSTALLED BY A REGISTERED ELECTRICAL  
TESTER FOR SINGLE PHASE IF THE SUPPLY VOLTAGE OF THE CONNECTION APPLIED FOR IS 230 VOLT,  
OTHER THAN THAT AN INSTALLATION ELECTRICIAN OR A MASTER INSTALLATION ELECTRICIAN DEPENDING ON THE  
ELECTRICAL INSTALLATION TYPE, AND ALSO EITHER 230 VOLT OR 400 VOLT, REFER TO ELECTRICAL  
INSTALLATION REGULATIONS OF THE OCCUPATIONAL HEALTH AND SAFETY ACT 85 OF 1993*

**I, THE APPOINTED ELECTRICAL CONTRACTOR, HEREBY ADVISE THAT ELECTRICAL INSTALLATION WORK WILL COMMENCE  
AT THE APPLICANT'S ADDRESS AS REQUESTED FOR BY THE SPECIFIED TENANT / OCCUPIER / AGENT / OWNER ON PAGE 1**

NOTE: FARMS AND AGRICULTURAL HOLDINGS, FULL DESCRIPTION AS PER TITLE DEED IS REQUIRED

DESCRIPTION OF PROPOSED INSTALLATION WORK:

DATE OF COMMENCEMENT OF INSTALLATION WORK:  DD -  MM -  YYYY

ESTIMATED CAPACITY OF ELECTRICAL INSTALLATION:  KVA  AMPERE  VOLTAGE

ELECTRICAL CONTRACTOR ( COMPANY DETAILS )  TITLE:MR/MS/OTHER

FIXED ADDRESS:

ELECTRICAL CONTRACTOR'S REGISTRATION NO. AS PER ANNEXURE 3 OF EIR:

SIGNATURE:  NAME OF SIGNATORY:

OFFICE TELEPHONE NO.:    CELL NO.:

FAX NO.:

REGISTERED PERSON ( ELECTRICIAN PERFORMING WORK )  TITLE:MR/MS/OTHER

( A ) - ELECTRICAL TESTER FOR SINGLE PHASE: ETSP NO.:

( B ) - INSTALLATION ELECTRICIAN: IE NO.:

( C ) - MASTER INSTALLATION ELECTRICIAN: MIE NO.:

SIGNATURE:

CELL NO.:

COMPETENT PERSON / APPROVED INSPECTION AUTHORITY\*:

FIXED ADDRESS:

APPROVED INSPECTION AUTHORITY / COMPETENT PERSON CERTIFICATE NO.:\*

SIGNATURE:  NAME OF SIGNATORY:

OFFICE TELEPHONE NO.:    CELL NO.:

FAX NO.:

\* DELETE WHICHEVER IS NOT APPLICABLE

I, \_\_\_\_\_ BEING THE APPLICANT ( OWNER / TENANT \*) HEREBY ACKNOWLEDGE THAT I  
HAVE APPLIED FOR THE ABOVE ELECTRICITY SUPPLY CONNECTION AND THAT I HAVE RECEIVED THE ADVISORY LETTER FROM  
THE CUSTOMER CARE SECTION.

SIGNATURE:  DATE:  DD -  MM -  YYYY

FOR OFFICE USE: TO BE ARCHIVED IN STAND FILE:

APPROVED: YES  NO  ADVISORY LETTER ISSUED TO APPLICANT: YES  NO

ASSISTED BY COUNCIL'S OFFICIAL NAME:

DESIGNATION: