Request for Permanent Disconnection & Termination of Agreement

Service Connection No. 1000804717 Name of the consumer: Sosephine RM. Dhanglure & Maria W.H. Dhanglure Consumer category: CLT Contracted load: 3 KW Address: DORAM VILLA, BOMFYLDE ROAD, SHILLONG-78300)
Mobile No and Email 9863062122
It is requested that the above connection may be disconnected and the with the Licensee be terminated forthwith.
Note: The following documents are attached with the application form: 1. Copy of last bill 2. Copy of payment receipt of last bill
Thank you.
Date: Signature of the Consumer Name:
Place: Phone no.:
Address:
A - I evylodgoment
Acknowledgement
Application of (name of applicant)
Application of
complete in all respects to disconnections (date).
received at this office on (date). In this regard, the applicant is given a reference no to be used for all future
In this regard, the applicant is given a reference has
correspondence.

Signature / Seal of Licensee's representative Name and Designation:
Mobile No