

CONSUMER ID
1000696500

HOSPITAL BUILDING P.H.C
Resubelpara Salpara
Mobile No :

BILL DATE
03-Jan-2024

DUE DATE
18-Jan-2024

NET BILL AMOUNT
₹ 358614.00

To avoid inconvenience,
Kindly pay your bill timely.



For complaint/ query, Please contact to nearby
division/ sub-division

Bill Number **500294784926**
Legacy Consumer Id **69000000203**
C.Demand/Load **100.000 KVA**
Meter No **MEB92134**
OMF **4.00**
No. of Days **30**
Bill Basis **OK**
Category **DHT.**

CONSUMPTION DETAILS

PREV READING

Prev. Reading Date : **04-Dec-2023**
Prev KWH : **24649.000**
Prev KVAH : **24886.600**

CURRENT READING

Curr. Reading Date : **03-Jan-2024**
Current KWH : **24946.500**
Current KVAH : **25186.200**

OTHER READING

Rec. Demand KW : Metered Unit (KVAH) : **1198.400**
Rec. Demand KVA : Billed Unit : **1234.352**
Billed Demand : **100.000**

MISCELLANEOUS

Last Payment Date : **31-Jul-2023** Consumer Type : **Domestic(HT)**
Last Payment Amount : **₹ 604499.94** Connection Location : **Urban**
Payment Amount : **₹ 0.00**
Connection Type : **SG**

CHARGES DETAILS (IN RUPEES)

Energy Charges **8517.03**
Fixed Charge **30000.00**
ED Amount **61.72**
FPPPA Charges **0.00**
Meter Rent **0.00**
TMC **2000.00**
DPC **3003.43**
Current Bill Amt **43582.18**

Prev Outstanding **₹ 315030.84** Gross Bill Amount **₹ 358613.02**

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SAVE ENERGY SAVE MONEY
SAVE THE PLANET

Turn off the lights before leaving...

Megha Power App

View electricity bill, Make payment, Know your daily
consumption, Trust billing, Raise complaint &
Apply for new connection and many more...



Cheque should not be post dated and please mention A/c No. as well
on the back of the Cheque/DD.



This bill will be construed as final notice under Section 9.2 of MSERC (Electricity Supply Code) Regulations, 2018. Supply of electricity shall be disconnected at any date, if dues of Electricity bill is not paid within 15 (fifteen) days (notice period) after due date of the bill.



Cheque should not be post dated and please Mention A/c No.
as well on the back of the Cheque/ DD.

Signature :

Consumer Id
1000696500

Consumer Name
Hospital Building P.H.C

Net Bill Amount
358614.00

Paid Amount

Paid Date