

2786

NEW CONSUMER APPLICATION FORM

☐ If Consumer Apply for Sub-Meter/ Additional Connection
(Please tick on the check box)



Personal Details

* Application No.
* Consumer Name
* Father's Name
* Mobile No.
* Aadhar / EPIC No.

Daiahun Myrten
Shengdar Lapang
6909908018 Email
2RL0925800

Address Details

* Accommodation
* Discom
* Zone
* Sub Division
* Village Name
* State
* Area Pin Code
* Full Address

Own / Rented (Pl tick one)
Meghalaya Power Distribution Corporation
Eastern Zone * Circle Ribhoi Circle * Division Umiam Division
Umiam Rural Distribution Sub-Division
Umroi Labansaro
Meghalaya * City Ribhoi (Nongpoh)
793103 Locality Umroi Labansaro
Umroi Labansaro

New Connection Details

* Consumer Type SG / CG / NG (Pl tick one) * Urban/Rural Type Rural / Urban (Pl tick one)
* Activity House
* Contract Load Unit KW / KVA (Pl tick one) * Contract Load 2KW
* Category Domestic * Product Type LT / HT (Pl tick one)
* Scheme All Categories excluding industrial / Industrial / Free Scheme /
Saubhagya / DDUGJY (Pl tick one)

Other Details

* Meter Number _____ * Initial KWH _____ * Initial KVAH _____
* Meter MF _____ Meter Owned - Utility / Consumer (Pl tick one)
* Phase 1 Phase / 3 Phase (Pl tick one) * TMC Yes / No (Pl tick one)
Meter Reader _____ Group No _____

List of Documents to be attach:

- * Test Report
- * Ownership Proof
- * Identity Proof
- * Meter Test Report
- * Landlord NOC
- * Agreement Fill
- * Pollution Control Board

All fields mark with * are mandatory

Date of Connection: _____

Distances - 20m

B Scheduled Form 7

Meghalaya Power Distribution Corporation Limited
Test Report

KVA-100
Akhobut

This is to certify that repaired/renewed/additional/new electric installation at the premises of

Full name

PAI ANUN - MYATEN

(Please leave one block between name & surname)

Address

L.A. BANSHARD

1. The load has been arranged as follows

Details of load	Wattage of each item	Phase I		Phase II		Phase III		Total wattage of all 3 phases
		No. of points	Total wattage	No. of points	Total wattage	No. of points	Total wattage	
1. Light points	60W	4	240W					
(i) Fluorescent								
(ii) Incandescent								
(iii) CFL LED	9W	10	90W					
(iv) Halogen								
(v) Others								
2. Fan points								
3. Plug points (3-Pin)								
(i) 6 Amps	100W	4	400W					
(ii) 15 Amps	1000W	1	1000W					
4. Electrical gadgets								
(i) Water Heater (Geyser)								
(ii) Refrigerator								
(iii) AC								
(iv) Others								
5. Welding transformer								
6. Motor								
Total								
In case of load enhancement existing load (in watts)								
Total load in the premises (in watts)			1730W	or 2kW				

Notes:

- (a) Details of any apparatus (other than the above mentioned) should be given.
(b) Rating of capacitor used in induction Motor and welding Transformer (Test report of capacitor is to be enclosed)

KVAR

II. Type of wiring *pvc coving pipe*

III. Voltage and system of supply *220V*

IV. Test Result *OK*

Date of testing by licensed contractor

2	7	0	3	2	5
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	Type of test	Result of test carried out by licensed contractor (in M Ω) / Ω	Result of test carried out by the supplier under relevant Cea regulations, (in M Ω) / Ω
(a)	Insulation resistance between earth and whole system of conductor.	100 <i>ms</i>	
(b)	Insulation resistance between all conductors	120 <i>ms</i>	
(c)	Earth continuity between earth electrode and earth continuity conductor	3 <i>ms</i>	
(d)	Polarity of non-linked SP switches	0V / P.N: 220V EN: 0V	

V. Full name with signature of licensed contractor (with date)

LIC No.

Mobile No.

VI. Full name with signature of supervisor (with date)

LIC No.

Mobile No.

VII. Full name with signature of wireman (with date)

LIC No.

Mobile No.

VIII. Signature of the authorized official who

tested the installation on behalf of supplier (with date)

Mobile No.

IX. Date of connection of supply to the installation

M/s. R. D. Electrical
Svt. Electrical Contractor
Lic. No: 381

Mr. R. Dohdoi
Electrical Supervisor
Reg. No: 459

[Signature]



SEX Female
DATE OF BIRTH/AGE: 17/08/1989
ADDRESS
HNo.17, LABANSARO,
VILL-LABANSARO,
DIST-RABHONG-793103

Date 22-1-2018 Electoral Registration Officer
Assembly Constituency No & Name :
12 - UMROl

Part No and Name :
22 - LABANSARO

Note
1. An individual who is not eligible to vote should not bring this card when they come to the polling station. If you are not sure, you should bring it with you.
2. Mere possession of this card is no guarantee that you are eligible for the current electoral roll. Please check your name in the current electoral roll before every election.
3. Do not use this card for any other purpose.
4. Date of Birth mentioned in this card shall not be treated as a proof of age for any purpose other than registration in electoral roll.

DORBAR SHNONG UMROI LABAN SARO RAID MAWBUH MYLLIEM SYIEMSHIP

RI- BHOI DISTRICT MEGHALAYA - 793116

Under Rule 5(5) Of The Khasi Autonomous District (Appointment And Succession Of Chiefs And Headman) Rules, 2015 Of The
United Khasi Jaintia Hills Autonomous District (Appointment And Succession Of Chiefs And Headman) Act, 1959

Ref. No

Date 11/07/20

KA KOT IOH BYNTA (DULIR)

Manga ka Kmie / Kpa/ hynmen Swinda Myllen khun jong I Kong
hapdeng ka jingiapyneitlang haing ha sem rynkat bad ki sakhi satar nga la ai bynta ia jaka
/ kper ka jong nga kaba don ha Umroi Laban Saro sha ka khun jong nga ka
Dairahun Myllen.

Ki pud sawdong ki long kumne harum :-

Mihngi - ka jaka ka Arbasha Myllen

Sepngi- ka Surak Shrong

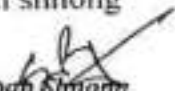
Shatei - ka jaka ka Arbasha Myllen

Shathie- ka jaka ka Nalisha Myllen

Ka jingheh kane ka jaka ka long _____

Nga pynshisha ia kane da kaba nga soi la ka kyrteng harum.

Rangbah shnong


Rangbah Shnong
Umroi Labansaro
Raid Mawbuh
Ri-Bhoi District

Secretary Shnong


Secretary Shnong
Umroi Labansaro
Raid Mawbuh
Ri-Bhoi District