

2770

NEW CONSUMER APPLICATION FORM

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



Personal Details

* Application No. _____
 * Consumer Name Kathie Meis Deenase
 * Father's Name Hamekiman Deenase
 * Mobile No. 6909062076 Email _____
 * Aadhar / EPIC No. XSUC098806

Address Details

* Accommodation Own / Rented (Pl tick one)
 * Discom Meghalaya Power Distribution Corporation
 * Zone Eastern Zone * Circle Ribhoi Circle * Division Umiam Division
 * Sub Division Umiam Rural Distribution Sub-Division
 * Village Name Umiamblei
 * State Meghalaya * City Ribhoi (Nongpoh)
 * Area/Postcode 793104 Locality Umiamblei
 * Full Address Umiamblei

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 3KW
 * 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 Bill
- * Pollution Control Board

All funds mark with * are mandatory

Date of Connection: _____

Meghalaya Power Distribution Corporation Limited
Test Report

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

Full name

KATHIE - MOI - S - DECRUSE

(Please leave one block between name & surname)

Address

UMRAMBILI

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) 16 Amps	1000W	2	2000W					
4. Electrical gadgets								
(i) Water Heater (Geyser)								
(ii) Refrigerator								
(iii) AC								
(iv) Others								
5. Welding transformer								
6. Motor								
Total			2730W					
In case of load enhancement existing load (in watts)								
Total load in the premises (in watts)			2730W or 3KW					

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 casing 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 MΩ) / Ω	Result of test carried out by the supplier under relevant Cea regulations, (in MΩ) / Ω
(a)	Insulation resistance between earth and whole system of conductor.	100MΩ	
(b)	Insulation resistance between all conductors	120MΩ	
(c)	Earth continuity between earth electrode and earth continuity conductor	3Ω	
(d)	Polarity of non-linked SP switches	0-220V 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 Co.
Lic No : 381

Mr. R. D. Dhotan
Electrical Super
Regd No : 42

[Signature]

भारत निर्वाचन आयोग

ELECTION COMMISSION OF INDIA

चुनाया फोटो पहचान पत्र - ELECTOR PHOTO IDENTITY CARD



XSU0098806



NAME :

KATHIE MOI S.
DECRUSE

FATHER'S
NAME :

HAMEKIMAN
DECRUSE

DORBAR SHNONG UMRAMBLEI

RAID MAWBUH :: MYLLIEM SYIEMSHIP

Ri-Bhoi District, Meghalaya

P.O. Jumer - 4 No - 793104

Date: 10/9/2022

KA DURLIR KHYNDEW NA KABA IA DIE IA THIED

Hapdeng ka koit ka khiah baroh shi iing shi sem ryngkat ki sakhi satar baroh kiba soi kyrteng harum: -

Nga KA KONG DWIAN KAPEW khun
jong 1 KONG SKU KAPEW (2) ba shong basah hapoh
HAPOH UMARAMBLEI, Ri-bhoi District, nga ia die
bai lut ksan noh ia katei ka jaka kaba nga don hapoh ka Shnong Umramblei Ri-Bhoi
District ha U/Ka KONG KATHIE MOI S. DECRUE ba shong bas ah
hapoh LUMMARBOH ha ka dor Rs. AR. LAK. TYNAKA
NONRAH

Bad ki pud sawdong baroh kin long kumne harum: -

MIHNGI : kehapum kong Dwian kapeu

SEPNGI : Surok Shuang.a

SHATEI : kong Dwian kapeu

SHATHIE : kehapum a kong Adakurba

Ka Jingheh (Area) jong katei ka jaka ka long _____ tam lane duna.

Bad naduh mynta ka sngi 10/9/2022 phin long trai hi noh
ma phi ia katei ka jaka.

Bad lada don kano kano ka jingujor pyrshah ia phi halor katei ka jaka
katkum u tei u pud u sam, nga kloi ban ia don lang bad phi ha katei ka bynta.

NONGDIE

Dwian kapeu
= Dwian

Dwian
10/9/22
Secretary Shnong
Umramblei
Mylliem Syiemship
Ri-Bhoi District

SAKHI

phin khyllat
- P. K. H. S. I. T
Jorbad mawlang
- J. M. S. I. T
Dwastik Nongnang
- 

NONGTHIED

KATHIE MOI S. DECRUE
Chuan

Dwian
Rangbah Shnong
Umramblei
Mylliem Syiemship
Ri-Bhoi District