

# NEW CONSUMER APPLICATION FORM

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

## Personal Details

\* Application No \_\_\_\_\_  
\* Consumer Name Melouis Mawmai  
\* Father's Name \_\_\_\_\_  
\* Mobile No 6009733857 Email \_\_\_\_\_  
Aadhaar / EPIC No 9220560441



## 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  
\* Village Name Umiam Nongpoh  
\* State Meghalaya \* City Ribhoi (Nongpoh)  
\* Area Pin code \_\_\_\_\_ Locality \_\_\_\_\_  
\* Full Address \_\_\_\_\_

## New Connection Details

\* Consumer Type SG / CG / NG (Pl tick one) \* Urban/Rural Type Rural / Urban (Pl tick one)  
\* Activity \_\_\_\_\_  
\* Contract Load Unit KW / KVA (Pl tick one) \* Contract Load: 1  
\* Category DLT \* 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: \_\_\_\_\_

Distance 28 meter  
line man. *[Signature]* 25.12.14

**APPLICATION FORM FOR PROVIDING LT SERVICE CONNECTION  
(FOR ALL CATEGORY AND FOR ALL PURPOSE)**

To,

The Area Manager/Asst. Executive Engineer  
Service Connection Sub-Division/.....Distribution Sub-Division  
MeSEB UMSUNG  
(Indicate the local area of the jurisdiction of the Engineer of the licensee)

- Sir,
1. I/We here request you to supply electricity to the premises located at the address more fully described below, I/We are the owner/lawful occupier of the premises.
  2. I/We agree to abide by the terms and conditions relating to the supply of electricity by MeSEB and to make all payments as may be required and also to pay regularly all charges as may become due.

- 3 a). Full name and address of the applicant with contact telephone number  
SMTI MELORIS MAWNAI UMTALU NONGKHLA  
E-W-K HILLS.

b) Status in relation to the premises

Owner

☒

Occupier

☐

c). Location and address of the premises including Police Station. DONG KIINGDING.

d). Nature of LT supply :

Commercial

☐

Domestic

☒

Industrial

☐

General Purpose

☐

WSLT

☐

PL

☐

Agriculture

☐

KJ

☐

Date:

*[Signature]*  
Applicant's Signature

NB: The following documents are to be enclosed:

- 1) Test Report from Licensed contractor.
- 2) Agreement Form duly filled in.
- 3) Proof of ownership (in case applicant is owner).
- 4) Number of nearest Electric Pole.
- 5) NOC of the owner of the premises (in case the application is an occupier).
- 6) Attested copy of permission obtained from Pollution Control Board.
- 7) Building Permission from the concerned authority.



II. Type of wiring *Loop in system*

III. Voltage and system of supply *220 Volt DLT Supply,*

IV. Test Result: *Good*

Date of Testing by Licensed Contractor:

*280525*

Type of Test	Result of test carried out by licensed contractor (In (M $\Omega$ )/ $\Omega$ )	Result of test carried out by the supplier under relevant IE Rules, in (M $\Omega$ )/ $\Omega$
a. <input checked="" type="checkbox"/> Insulation resistance between earth and whole system of conductor.	<i>25 <math>\Omega</math></i>	
b. <input checked="" type="checkbox"/> Insulation resistance between all conductors.	<i>25 <math>\Omega</math></i>	
c. <input checked="" type="checkbox"/> Earth continuity between earth electrode and earth continuity conductor.	<i>25 <math>\Omega</math></i>	
d. <input checked="" type="checkbox"/> Polarity of non-linked SP switches.	<i>Phase</i>	

V. Full Name with signature of Licensed contractor

LIC No.

*B.Kalwing & Sons*  
:Electrical Contractor  
Regn. No. Shg/2003/607

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

LIC No.

*Mr. B. Kalwing*  
:Electrical Supervisor  
Regn. No. Shg/2001/819

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

PERMIT No. :

*B. KALWING*  
:Electrical Workman  
Lic No. MEG/SHG/96/3630

VIII. Signature of the authorized official who tested  
The installation of behalf of supplier.

IX. Date of connection of supply to the installation

# Meghalaya Energy Corporation Limited

## TEST REPORT

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

CMTI PDEIORIC PLANNAI

(Please leave one block between name & surname)

(Full Name)

UMTHLU NONGKHLA E. N. K. HILL.

(Address)

is duly completed, tested and is ready for your Engineer to test and connect on your main line.

1. The load has been arranged as follows: -

Details of Load	Wattage of each item	Phase - 1		Phase - 2		Phase - 3		Total watt of all 3 phases
		No. of points	Total watt	No. of points	Total watt	No. of points	Total watt	
1. Light points (i) Fluorescent (ii) Incandescent (iii) CFL (iv) Halogen (v) Others	60	3	180					
2. Fan points								
3. Plug points (3-pin) (i) 6 Amps ✓ (ii) 16 Amps ✓	100	2	200					
4. Electrical gadgets (i) Water Heater (Geyser) (ii) Refrigerator (iii) Air Conditioner (v) Others								
5. Welding Transformer								
6. Motor								
Total			380					
In case of load enhancement								
Existing load (in watts)								
Total load in the premises (in watts)								

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





EPIC No. : GZZ0560771

Gender : Female  
Date of Birth Age : 54

Address : HNo.3, UMTHLU, VILL-UMTHLU, DIST.  
EASTERN WEST KHASI HILLS-793120

Date : 22-02-2022

Electoral Registration  
Officer

Assembly Constituency No. and Name : 30-  
MAIRANG (ST)

**NOTE / Note :**  
1. The card is valid only for the purpose of registration in the electoral roll. It is not valid for any other purpose.  
2. Mere possession of this card is no guarantee that you are listed in the current electoral roll. Please check your name in the current electoral roll before every election.  
3. The card is valid only for the purpose of registration in the electoral roll. It is not valid 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.



# DORBARSHNONG UMTHLU NONGKHLA NONGKHLAW SYIEMSHIP

Eastern West Khasi Hill District

Meghalaya -793120

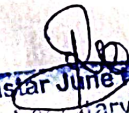
Under Rule S (S) of the Khasi hills Autonomous District (Appointment and Succession of Chiefs and Headman) Rules 2015 of the United  
Khasi-Jaintia Hills Autonomous District (Appointment and Succession of chiefs and Headman) Act, 1959


SANAD NO: NK/SS/429/98-16/86-16

Dated: Nongthlu Nongkhla  
The : 06 May 2025

## No Objection Certificate

Kane ka dei ka jingpynshisha ba ka kong  
phinia mawmai . ba shong ba sah ha Umthlu  
Nongkhla, ka dei ka hongshong shnong ba pura  
bad ka don ia ka jinglong kaba bha. Ngi  
ai iaka No Objection Certificate ha ka jingkyapad  
jongka. ka shnong kam don kano kano ka  
Objection ha ka ban apply naka bynta ka  
jingthep light thymmai.

  
Rastar June Kyntathiang  
Secretary Shnong  
Umthlu Nongkhla  
Hima Nongkhlaw Syiemship

  
Rastar Majaw  
Sordar Shnong  
Umthlu Nongkhla  
Hima Nongkhlaw Syiemship