

Request for Permanent Disconnection & Termination of Agreement

Service Connection No. 1000813503

Name of the consumer: Klozinda Pyngrope

Consumer category: DLT

Contracted load: 1 kW

Address: Nongmensong Shillong.

Mobile No and Email 9774535637 / 7640964160

It is requested that the above connection may be disconnected and the relevant Agreement 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: 31st March 2026

Place: Shillong

Name Klozinda Pyngrope

Phone No.: 9774535637

Address Nongmensong

Signature of the Consumer [Signature]

Acknowledgement

Application of _____ (name of applicant) complete in all respects for disconnection and termination of Agreement has hereby been received at this office on _____ (date).

In this regard, the applicant is given a reference no. _____ to be used for all future correspondence.

Signature / Seal of Licensee's representative

Name and Designation:

Mobile No