

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

To,

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

Sir,

1. I/We hereby 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 condition relating to the supply of electricity by MeECL 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

Bharti Hexacom Ltd.
Krai Kojum

- b) Status in relation to the premises

Owner

☒

Occupier

☐

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

- d) Nature of LT. supply :

Comercial	<input checked="" type="checkbox"/>	Domestic	<input type="checkbox"/>
Industrial	<input type="checkbox"/>	General Purpose	<input type="checkbox"/>
WSLT	<input type="checkbox"/>	PL	<input type="checkbox"/>
Agriculture	<input type="checkbox"/>	KJ	<input type="checkbox"/>



Date:

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).

TEST REPORT.

This is to Certify that repaired/renewed/additional/new electric installation at the premisis of :-

Full name :-

BARTI HEXACOM LTD

(Address)

KRAIKOTAM

(Please leave one block between name and surname)

Is duly completed tested and 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 items	Phase - 1		Phase - 2		Phase - 3		Total Watt of all 3 phases
		No of Pts	Total	No of Pts	Total	No of Pts	Total	
1. LIGHT POINTS								
(i) Fluorescent								
(ii) Incandescent.								9
(iii) CFL.	9	1	9					
(iv) Hologen								
(v) Others								
2. FAN POINTS.								
3. PLUG POINTS 3PIN								
(i) 6 Amps								2000
(ii) 15 Amp	1000	2	1000	1	1000			
4. ELECTRICAL GADGETS								
(i) Water heater.								
(ii) Refrigerator								
(iii) Air conditioner								
(iv) Others.								
5. WELDING TRANSFORMER								3750
6. MOTOR	5HP							5759
TOTAL LOAD								
In case if Load enhancement Existing load (In watts)								
Total Load in the Premises								

Note:
(a) 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

KVAR

II - Type of wiring: Looping in System

III - Voltage and System of Supply

IV - Test Result :-

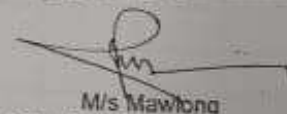
Date of testing by licensed Contractor:

0	3	0	1	2	0	2	4
Date		Month		Year			

Type of Test	Result of Test carried out by Licensed Contractor (In MΩ) Ω	Result of Test carried out by the Supplier under relevant I.E. Rule (In MΩ) Ω
a. Insulation resistance between earth and whole system of conductor	38MΩ, 36MΩ, 38MΩ	
b. Insulation resistance between all conductor	32MΩ, 34MΩ, 34MΩ	
c. Earth continuity between earth electrode and earth continuity conductor	36MΩ, 34MΩ, 34MΩ	
d. Polarity of non-linked SP switches	Pl. 12.	

V. Full name with signature of Licensed Contractor:

LIC No:


M/s Mawlong
Govt. Registered Contractor
License No. 1128

VI. Full name with signature of Supervisor: (With date)

LIC No:

VII. Full name with signature of Wireman:

Permit No:



For Office used only

VIII. Signature of the Authorized official who tested the installation on behalf of supplier

Signature:

IX. Date of Connection of supply to the installation: