

Application for Supply of Electricity at High Tension
(to be submitted in 5 sets)

Registration No:

Date:

Amount Paid Rs.:

DD No / Date:

To,

The Manager,

India Power Corporation (Bodhgaya)
Limited

Sir,

I / We request you to supply electricity at High Tension as mentioned below:

Affix latest
photograph

1a. Name of the Customer in whose name connection is required:

1.b Status of the Customer:

2. Address for Communication:

a) **Permanent:**

Khasara.No/House.No/Building Name

Village Name/Street/Ward.No

Landmark

City PIN

Phone No Mobile No

b) **Present:**

Khasara.No/House.No/Building Name

Village Name/Street/Ward.No

Landmark

City PIN

Phone No Mobile No

3. Location where Connection Required

Khasara.No/House.No/Building Name -----

Village Name/Street/Ward.No -----

Landmark -----

City ----- PIN -----

Phone No ----- Mobile No -----

Email Id -----

4. Type of Service Required (Please tick the service applied for):

- New Service
- Additional Load (Alteration / Extension to existing installation)
- Reduction of load
- Title Transfer
- Change of Category
- Existing Category:Proposed Category:

5. Category of Supply Requested (Please tick the category required):

Category	Purpose
HT S I	11 kV High Tension Service
HT S II	33 kV High Tension Service
EHT	132 kV Extra High Tension Service
HTSS	11KV/33KV High Tension Specified Service
RTS	25kV/132 kV Railway Traction Service

6. Are any other services existing in the same Premises:

Yes

No

If yes, details thereof are as follows:

SI.No	Particulars	Details
i	Existing Service Connection Number	
ii	Existing Contracted Maximum Demand (kVA)	
iii	Existing Contracted Load (HP/kW)	
iv	Existing Connected Load (HP/kW)	
v	Date of conclusion of present HT Agreement	
vi	Date of release of supply	
vii	A.M.G of the service, if any	
viii	Security Deposit	

7. Are any other services existing elsewhere in the same name or in the names of sister concerns?

Yes

No

If yes, the details thereof are as follows:

Service Connection Number	Category

8a. Requirement of New / Additional Load:

I	Contracted Maximum Demand (kVA) (With Phasing if any)	
II	Contracted Load (HP/ kW)	

8b. Details of connected at the time of commencement of supply:

9. Total Load Requirement (Existing + New / Additional Load):

I	Contracted Maximum Demand (kVA) (With Phasing if any)	
II	Contracted Load (HP/ kW)	

10. Nature of industry and product manufactured:.....

11. Number of running days in a month.....

12. Number of running shifts of the factory.....

13. Period of season if load is seasonal.....

14. Date by which service is required.....

15. Power of Attorney.....

16. Whether the industry is availing / proposes to avail power from other sources. If so, please provide details:

17. (a) Whether the industry has back up, captive generating plant. If so, please provide details

17. (b) Any other information

18. Supporting documents enclosed (Please tick where applicable):

Documents to be furnished

- Details of Land, Survey Plot No., Mauza, Revenue Village No., etc.....
- Contracted Load Details (Where available)
- Memorandum of Understanding
- Articles of Association, Partnership Deed
- Site plan indicating the Proposed Receiving Points of Power Supply from the Company
- General Power Attorney
- NOC from Local Body (Eg. Gram Panchayat of MCH)
- Consent from Pollution Control Board (If Applicable)
- SSI Certificate (If applicable)
- Industrial License
- Employment Potential
- Financial Assistance
- Line of Manufacture
- Letter for Undertaking Capital Works on Turnkey Basis (Optional)

I / We request the company to provide meter / metering equipment for measuring electricity supplied to me

We undertake to execute an agreement in the prescribed form, if so called upon by the Distribution Franchisee.

Signature of Applicant

Signature of Original Owner
(In case of title transfer)

Place

Date

Signed by the applicant in my presence:

Witness 1	Witness 2
Signature: Name and Address:	Signature: Name and Address:
Date:	Date:

ACKNOWLEDGE OF APPLICATION

Registration No:

Date of Registration:

Signature of
Receiving Officer with
Stamp:

Total Amount
Received:

Designated: