

Premises No.

--	--	--	--	--	--	--	--

Customer No.

--	--	--	--	--	--	--	--

Please complete all sections using block letters and/or ticking boxes where appropriate. **If you need help, please call 505460**

<b>1 Full name of customer applying for supply</b> Please enter details of the customer/s who will be responsible for paying electricity bills at address set out in section 2. This must be the same customer/s completing this form by signing section 8. If another person is jointly to be responsible for bills, please enter his/her name below.	
Forenames (Company name - in the case of a Limited Company)	
Surname	
Mr/Mrs/Miss/Title	
Daytime No	
Mobile No	
Email	

Forenames	
Surname	
Mr/Mrs/Miss/Title	
Tel No	
Work No	
Mobile No	

<b>2 Address at which supply is required</b>	
	Post Code

<b>3 About your new address</b>	
Is the property: Owned by you? <input type="checkbox"/> or rented <input type="checkbox"/> If rented please give the name and address of your Landlord or agent	
	Post Code
Tel No	
Is the property: A house? <input type="checkbox"/> A Flat? <input type="checkbox"/>	
Other? <input type="checkbox"/> (give details)	
What is the primary form of heating?	
<input type="checkbox"/> Electricity <input type="checkbox"/> Gas <input type="checkbox"/> Oil <input type="checkbox"/> Misc	

<b>4 Date supply is needed by</b>		
Day	Month	Year

**PLEASE NOTE:** Please allow 3 working days between receipt of this form at our offices, and your required date for connection

<b>5 What address should we send the bill to?</b>	
Please tick if same as above <input type="checkbox"/> If you have not ticked the box please give the address to which you wish the bill to be sent.	
	Post Code

Clear investment. Pure energy.



**Jersey Electricity plc**

The Powerhouse, PO Box 45, Queens Road, St. Helier, Jersey, JE4 8NY

# APPLICATION FOR A SUPPLY OF ELECTRICITY TO DOMESTIC PREMISES

<b>6 What is the name and new address of previous occupier?</b>	
	Not known <input type="checkbox"/>

<b>7 Are you vacating existing premises?</b>	
Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please give previous address	
	Post Code
Previous Customer number	
Is the electricity bill at the previous address in your name?	
Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please note that you will remain responsible for future electricity bills rendered to your previous address, until you make a written request to our Customer Care Centre, for a final meter reading to be taken.	

**PLEASE NOTE:** Unless this section is completed you are likely to be asked to pay a security deposit, see section 8.

<b>8 Payment of bills</b> Normally bills are issued quarterly and are payable in full immediately. Please indicate which of the following payment facilities you would wish to use.	
A <input type="checkbox"/> Monthly by Direct Debit (£2 discount per bill)	
B <input type="checkbox"/> Variable Direct Debit (£2 discount per bill)	
C <input type="checkbox"/> Pay As You Go Meter	
D <input type="checkbox"/> Quarterly on receipt of bill - by cash, cheque, Electricity Stamps, Debit Card	
E <input type="checkbox"/> My/Our existing plan	
F <input type="checkbox"/> Monthly Payment plan	

**PLEASE NOTE:** Applicants may be requested to pay a deposit. This requirement may be deferred for customers who pay monthly by direct debit, or those that provide a suitable guarantor.

### DECLARATION

- \* I/We apply for a supply of electricity on the conditions set out in the Jersey Electricity plc's Official Terms and Conditions of Supply and Tariff leaflets.
- \* I/We accept responsibility for the payment accounts (When there is more than one signatory to this application each signatory is jointly and severally responsible).
- \* I/We warrant the accuracy of the information given above.

Signature	Date
Signature	Date
(If signing on behalf of a Company please give own name and position held in Company)	

**PLEASE COMPLETE AND RETURN TO:**  
Customer Care Centre, The Powerhouse,  
PO Box 45, Queens Road St.Helier JE4 8NY