

SOUTHERN POWER DISTRIBUTION COMPANY OF T.S. LIMITED Application for supply of Electricity at Low Tension

Name o	of the Section:			N	ame of ERO:					
Registr	ation No. With D	Date:								
	I/ We request y	ou to supply	electricity at	Low Tensio	n to my/ow	n Premises as	mentio	ned below:		
1.	(a)Full Name wi	ith surname:	;				1			
	(b). Father's / Husband's Name:							Affix the Passport		
	(c) Adhar card r	number:						Photo of Applicant		
2.	(a) Address:									
	For service connection:-				For com	munication:-				
	H.no:				H.no:					
	Street:				Street:					
	Village:			Village:						
	Mandal			Mandal						
	District:				District:					
	Pin code :				Pin code	e :				
	Phone no.:	hone no.:			Email Id:					
3.	Existing service Connected Load			KW/HP						
		_								
5.	Purpose of cate	egory:								
6.	Social Group (SC/ST/GEN.)	:		(If SC/ST	caste certifica	te is ma	ındatory)		
7.	Status of App	olicant (Plea	ase tick the s	service App	olicable) :					
	Individual/ Par	rtnership/ Pu	ıblic Compan	y Ltd. / Priv	ate Compan	y Ltd./Goveri	nment I	nstitutions	others	
8.	Demand Draft	for Rs:		DD	No. / Dt:					
9.	Documents Pr	ovided:			()	res/No)				
	3) Underta	ation Documo aking Letter	ent /Indemnit ficate(for Indu		Cat III)					

Signature of the Applicant