FORM | Application for Supply of Electricity (RAES)



This form applies to properties supplied with electricity under the Remote Areas Energy Supplies scheme.

This form is to be used where you are moving into a property that has an existing electricity connection. If the property has no electricity connection, you will first be required to complete the "Application for a New Connection/Notice of Alteration" form.

Completed forms are to be forwarded to Cowell Electric at PO Box 70, Cowell SA 5602, or by email to accounts@cowellelectric.com.au, or by Fax to 08 8629 2115.

Date electricity required	/	/	Do you re	Do you require an interpreter? Yes \(\square\) / No \(\square\)								
Full name in which the account is to be rendered:	☐ Mr ☐ Ms ☐ Mr ☐ Miss											
Address of premises at which supply is required:	Lot # Flat # House			Post Code								
ype of premises Home Business State Gov Federal Gov Other												
Please describe type of Business (if not residential)												
Is the property leased \square or owned \square If leased, state owner/property manager Previous Occupier (if known)												
Do you have a hot water s	ervice Yes 🗌	(size) / No [
Occupation			Employer									
Date of Birth/	/ _/F	Are you eligil Pensioner Co	ble for oncessions? Y	′es	*'							
If eligible for a pensioner condat the following website:												



Page 1 of 3 Document Number: ADM.TM.1044 | Version Number: 2.0

FORM | Application for Supply of Electricity (RAES)



	Lot #	Flat #	House #	Street Name	Town		Post Code
Last address at which applicant has been responsible for accounts							
Does the applicant have any special needs? If so please specify (eg: Life support) Is the meter box outside the hou yes / No	se and i	is the m	eter acc	essible by n	neter reader wi	thout the u	se of a key?
If response above is yes, no furt please complete the attached "M						esponse al	bove is No,
The Undersigned Applicant hereby energy to the premises hereunder conditions under which electric energiapplication and the applicant agree Electric Supply Pty Ltd from time to	to be us rgy is su s to be b	ed solely	y for the p	ourposes her well Electric S	eunder stated) s Supply Pty Ltd a	subject to the the the	ie f this
By signing this application you want the subject of this application and for premises.							
IMPORTANT: The Applicant agree accrued up to the expiration of thre that the Applicant desires the termi shall be determined by Cowell Electropylicant to select the most suitable particular case will be readily given	e days a nation of tric. Wh e tariff pe	fter the r this agr ere alter ermitted	receipt by eement. mative ta	Cowell Elect The class of riffs are allow	ctric of written no f consumption ar ved it is the resp	otice from the nd appropria onsibility of	ne Applicant ate tariff(s) the
Please note that in accordance with and identifying particulars may be r credit providers.							
This application must be signed be is for a business, or by the Mana Incorporated Body. # N.B. Except for authorised offi several personal liabilities for all	ger or S	Secretary persor	/ or simi ns signir	lar authorise	d officer on beh	nalf of a Country	ompany or
Full names of persons responsible for payment of account							
Signature					Date		<u></u>
IF COMPANY OR CORPORATION	I PLEAS	E COMF	PLETE T	HE FOLLOW	/ING:		
Full name of person signing							
Designation of					ACN		



Page 2 of 3 Document Number: ADM.TM.1044 | Version Number: 2.0

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Meter Access Form

Section 1: This form is to be completed if the meter is not accessible to the meter reader

Under the Energy Retail Code a meter reader must be given access to the electricity meter at each customer's supply address, in order to read the meter. As your electricity meter is not readily accessible for readings, please nominate one of the following methods in order for meter access to occur. Have the electricity meter relocated to outside your premises (at your own cost) Be present at the quarterly read dates Provide a key to Cowell Electric Supply (Please complete section 2 below) Please note that if a customer fails to grant access for the electricity meter to be read, for 3 consecutive billing cycles, the retailer may arrange for disconnection of the electricity supply at the customer's supply address. Section 2: This section is to be completed if you wish to provide a key to Cowell Electric Supply for access to the electricity meter. Please post the key via registered mail with the completed application for supply form. Full name of person ☐ Mr ☐ Mrs supplying key: **Business Phone** Contact details **Email** Lot # Flat # House # Street Name Address of premises at which key is issued for: Home ☐ Business ☐ State Gov ☐ Federal Gov ☐ Other: Type of premises Please describe door key provided (e.g. front, garage) Additional comments / special instructions as relevant Date key posted: / / Section 3: Access to Electricity Supply Meter & use of Key provided Refer to clause 32 of the Remote Areas Energy Supplies (RAES) Customer Connection and Supply Contract, for details on access to your supply address. In addition to information contained within clause 32, Cowell Electric shall: 1. Store all keys supplied within a secure location, along with a key register.

- 2. Ensure Keys are removed only for purposes related to the distribution and retail of electricity at the supply address to which the key relates and shall be returned to the secure location for safe keeping as soon as practicable after their use.
- 3. Ensure keys are identified only by the meter number for which they relate.
- 4. Ensure the meter reader is subject to an annual Federal Police clearance check and signs a declaration that keys supplied will be used ONLY for the purpose of accessing a supply address for Cowell Electric business related to the distribution and retail of electricity to that address.
- 5. Return all keys supplied, to the contract holder, on termination of their electricity supply contract.

Note: The Remote Areas Energy Supplies (RAES) Customer Connection and Supply Contract can be found at the following website; www.energymining.sa.gov.au/raes



Page 3 of 3 Document Number: ADM.TM.1044 | Version Number: 2.0