

MAHARASHTRA INDUSTRIAL TOWNSHIP LIMITED (A Government Undertaking) **CHHATRAPATI SAMBHAJINAGAR**

Application Form - Tariff Category Change

including Power Quality) Regulations, 2021 **Application No.-**Area, Chhatrapati Sambhajinagar

As per Maharashtra Electricity Regulatory Commission (Supply Code and Standard of Performance of Distribution Licensees

To, The General Manager (Electrical Projects), Maharashtra Industrial Township Limited, Auric Hall, Shendra Industrial I / We hereby submit application for Tariff Category Change **1 Existing Supply Details** Name of the Supplier: -No.- Existing Sanctioned Contract Demand (kW/kVA): Con. Supply Voltage: - 🔲 Low Voltage (LT) Single Phase 🔲 Low Voltage Three Phase 🦳 High Voltage 🦳 Extra High Voltage **Existing Category of Supply: -**☐ Commercial ☐ Temporary Religious ☐ Advertisement & Hoardings ☐ Railways Residential ☐ Industrial Validity General Purpose **2 Power Supply Requirement** Load Details: - Connected Load | Contract Demand Supply Requested (kW) (kVA) by Date: -No. of Meters : _____ Ρι ailways

urpose of Supply:		
Required Category of Supply: -		
Residential Commercial Temporary Religious	Advertisement & Hoardings	☐ R
☐ Industrial Validity ☐ General Purpose		
Street Lights		

3 A	pplica	ble to High Tensi	ion/ Ex	ctra F	ligh-Tens	ion Serv	ices										
•	Basio Phas	age at which supply c for projection of a ing of Contract De s, than provide the	contrac mand r	t den equir	nand – Div ed (Yes/No	ersity Fac o):	33kV ☐ 132 tor assumed:	≀kV [] 22	0kV							
	CD r	Tentative Date from which required															
CD require (kVA) along with remark if any a)							Terre				,,,,				<u>equil ce</u>		
b)																	
	c)																
4 Any	Who (a)S (b)S	e of Installation ether Supply is no ether the above of anctioned Load: ervice Connection icity dues outsta	unit ev on No: Inding	er op	ne premis	t some o	ther place or	tion a	appli	ied [.]	foı	r: -		_ / ſe	es ⊡N	lo	
5 Load Details (Applicable for Particulars			1		oad (A)	ı	onal Load (B		Red							Total (
Motive	Powe	r Load (kW)															
Connec	ad (kW/kVA)																
Contra	ct Dem	and (kVA)															
6 The	Wirin	g & Load details	Certifie	ed by	the follo	owing Lic	ensed Electr	rical (Cont	ract	tor	•					
Name Email:																	
Addre	ss																
License No Valid Upto:							Ph No (s):						LEC Stamp			Signat	ure
						_											
7 Load Sr. No.	Name of Appliance / Machine Name of Appliance / Machine			parately	Load in kW No. of Applicant / Machines						ior	ו	Total L	Load kW			
							_										
							_										

^{*} Attach Supporting documents as per documents list – Annexure A

8 Disclaimer: - This application for power supply when processed and considered by the distribution licensee cannot be treated or utilized as proof that the premises for which the power supply is sought is an authorized structure nor would such consideration of an application by the distribution license amount to proof ownership of premises. वितरण परवानाधारकाने प्रक्रिया केल्यावर आणि विचारात घेतल्यावर वीज पुरवठ्यासाठीचा हा अर्ज ज्या जागेसाठी वीज पुरवठा मागितला आहे ती अधिकृत रचना आहे याचा पुरावा म्हणून हाताळता येणार नाही किंवा वापरता येणार नाही किंवा वितरण परवानाधारकाने केलल्या परिसराचा अर्जाचा मालकीच्या पुराव्याप्रमाणे विचार केला जाणार नाही.

9 Declaration: - As per MITL Format

I hereby declare that

I will abide by the provisions of Electricity Act 2003 and Maharashtra Electricity Regulatory Commission (Electricity Supply Code and other condition of Supply) Regulation 2005. I will further abide by rules & regulations issued by regulatory bodies & MITL from time to time. I will pay the electricity bill as per prevailing MITL Tariff. If the premises is declared unauthorized then at the of vacation by competent authority, MITL will have liberty to remove the electric connection immediately.

The above information is true and if any false information is observed, I / we will be responsible for the consequence thereof.

Signature of Applicant

	ame of Authorized: gnatories: -	
Mo	obile No.:	Signature:(Stamp of Organization Required for non-Residential Consumer)
%		dgement Receipt
For Office Use	Application No.: Applicant Name: - esentative MITL) Application Received Date: -	Signature & Office Stamp