ANNEXURE - V

Format of application form – Load Reduction

Licensee Name M/s_____

Application No. _____

Load Reduction		
Existing Load _____KW	Load Reduction Required _____KW	Total Load _____KW after reduction

1	Existing Consumer No.:	
2	Name of the applicant / organization:	
3	Name of the father/ husband/ director/ partner/ trustee:	
4	Address at which load reduction is required :	House/plot/premises No.
		Street
		Area /Colony
		Pin Code
		Telephone No.: Mobile No.: E-mail:
5	List of Documents: (i) Identity Proof	

Signature of Applicant