

A-1 Form for Power Supply for Residential / Commercial / Industrial Purpose

You can fill this form online also. Please visit www.mahadiscom.in
(Processing fee will be waived if application and payment is made online)

Date of Application: _____

To,
The Engineer,
Section /Sub-Division/ Circle Office,
_____.

Dear Sir / Madam,

I hereby submit this application for new connection for supply of electrical energy at the premises mentioned below

A. Details of Applicant

1)	Applicants Name (IN BLOCK LETTERS)	First name	Name of Father/Husband	Surname
2)	Email Id:	(Phone No)	(Mobile	
3)	Aadhar Card No. (Optional)			

B. Details of Premises

1)	Address of Premises House / Flat / Gala / Survey No. Street / Landmark: Taluka / City & District:		Society Name: Village: Pin Code:
2)	Type of premises	Self Owned ☐	Rented ☐ Occupier / Other ☐
3)	Name & address of the Owner :(If not self owned)		
4)	Nearest Consumer No for reference: (Please Specify)		

C. Power Supply Requirement

Type of Supply	Residential / Commercial / Industrial			
Single Phase (LT) ☐	Three Phase (LT) ☐	HT ☐	Connected Load(KW)*:	Contract Demand (KVA):

(* Please refer overleaf to calculate required load.)

D. Applicants Classification (for new connection of residential only)

a) General ☐	b) SC/ST ☐	c) BPL ☐
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E. Document attached

1)	Occupancy/Ownership proof:
2)	Identity Proof:
3)	Test report of Consumer's premises from Govt. Authorized contractor (to be submitted before the release of connection):

Declaration:

I hereby declare that

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

For Office Use:	Application No.:	Acknowledgement Receipt	Signature & Office Stamp (Representative MSEDCL)
	Applicant Name:		
	Application Received Date:		