GIBRALTAR ELECTRICITY AUTHORITY

GibElec House,
North Mole Road,
Gibraltar

Rosia Road Electricity Centre,
Consumer Division,
Gibraltar
Telephone: (00 350) 74191 Fax: (00 350) 48935
Email: consumer@gibelec.gi

APPLICATION FOR SUPPLY AND/OR DISCONNECTION OF SUPPLY

PLEASE ANSWER ALL QUESTIONS FULLY IN BLOCK CAPITALS.
FOR JOINT APPLICATIONS PLEASE FILL IN BOXES 1 AND 2.

1. Surname/Company Name: Dr/Mr/Mrs/Miss/Ms/Other

Forenames [In full]

Date of Birth ☐☐ ☐☐ ☐☐ *[Company Stamp]*

ID / Passport No. / Company Reg. No. ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

2. Surname/Company Name: Dr/Mr/Mrs/Miss/Ms/Other

Forenames [In full]

Date of Birth ☐☐ ☐☐ ☐☐ *[Company Stamp]*

ID / Passport No. / Company Reg. No. ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

3. Telephone Number *[Home]*: ☐☐☐☐☐ Telephone Number *[Mobile]*: ☐☐☐☐☐☐☐☐☐☐☐☐ Account Number *[If known]*: ☐☐☐☐☐☐

Telephone Number *[Work]*: ☐☐☐☐☐ Facsimile Number: ☐☐☐☐☐ Email: _____

MOVING IN – APPLICATION FOR SUPPLY

4. Address for Electricity Supply

Flat/Floor No.: _____ Name or Number of Premise: _____

Street or Estate: _____

5. Type of Supply

Domestic e.g. house or flat ☐
Commercial [Business] ☐
Industrial [Business] ☐
Change of Name Only * ☐

6. Do you have a Legal Right to occupy the premise where the supply is required

Yes ☐
No ☐

7. Name of Landlord/Management Company of Premise

8. State whether Installation is

New ☐
Existing ☐
Modified ☐

9. Your Previous Address

10. Billing Address if different to Address in Box 4

11. I/We hereby apply for the supply of electricity and agree to pay for the same, at such rates as may from time to time be charged by the Gibraltar Electricity Authority until I/We shall give the Gibraltar Electricity Authority notice in writing for the discontinuance of supply.

I/We also agree to abide by, and conform with the General Conditions / and Regulations for the supply of electricity contained in the Gibraltar Electricity Authority Act 2003 and those appended to this form [which I/We have received] and with any other conditions / regulations amending, adding to, or substituting the same of which the Gibraltar Electricity Authority may from time to time give notice in the Gazette.

Signature: _____ Date: _____

** Change of Name will only be accepted in the case of an Account being transferred from husband to wife, or vice versa, as a result of either one passing away and upon submission of a copy of the Death Certificate.*

If you are signing on behalf of a Limited Company, Partnership or/as an Authorised Agent, please state below your full name and the capacity in which you are signing:

Full Name: _____ Capacity: _____

MOVING OUT – DISCONNECTION OF SUPPLY

12. Address you are Leaving – *tick if same as Box 9 above* ☐

13. Account Number [From your last bill] ☐☐☐☐☐☐

Meter Number [If known] ☐☐☐☐☐

Cut-off Date: _____

14. Address to send Final Bill – *tick if same as Box 4 above* ☐

15. In accordance with the General Conditions / and Regulations for the supply of electricity, I/We hereby give notice that the supply to address as per Box 12 is no longer required by me/us.

Signature: _____
Full Name: _____
Date: _____

Signature: _____
Full Name: _____
Date: _____

FOR OFFICE USE ONLY

Appointment Date: _____ **Appointment Time:** _____

Deposit(s): £ _____ Application Fee: £ _____ Receipt No.: _____

Meter No.: _____ Minute No.: _____ Tariff No. _____

Filled In By: ☐