

**ZIMBABWE ELECTRICITY SUPPLY AUTHORITY**

**APPLICATION IN RESPECT OF ELECTRICITY SERVICES**

(PLEASE COMPLETE THIS FORM CAPITALS AND SUBMIT TO THE APPROPRIATE ZESA OFFICE)

FULL NAME OF APPLICANT .....

STAND/PLOT NUMBER.....

FARMS/STREET NAME.....

SUBURB /TOWNSHIP.....

NAME AND ADDRESS OF OWNER OF PREMISES (IF DIFFERENT FROM APPLICANT)

.....

NAME OF THE ELECTRICITY CONTRACTOR

.....

(PLEASE TICK APPROPRIATE

BOXES)

FOR WHAT PURPOSE IS THE SUPPLY REQUIRED			
DOMESTIC <input type="checkbox"/>	COMMERCIAL <input type="checkbox"/>	PUBLIC LIGHTING <input type="checkbox"/>	INDUSTRIAL <input type="checkbox"/>
IS THE SUPPLY TO BE PERMANENT OR TEMPORARY?			
PERMANENT <input type="checkbox"/>		TEMPORARY <input type="checkbox"/>	
STATE THE MATERIAL USED AS A ROOF COVERING			
MATAL SHEETING <input type="checkbox"/>	TILE/ASBEST <input type="checkbox"/>	THACH <input type="checkbox"/>	

a. NEW SUPPLIES ONLY		
<i>(PLEASE NOTE-ZESA RESERVES THE RIGHT TO SELECT THE MODE OF SERVICES FEED)</i>		
PARTICULARS OF THE SUPPLY REQUIRED		
SINGLE PHASE <input type="checkbox"/>	NUMBER OF SINGLE PHASE METERS REQUIRED <input type="checkbox"/>	OVERHEAD <input type="checkbox"/>
THREE PHASE <input type="checkbox"/>	NUMBER OF THREE PHASE METERS REQUIRED <input type="checkbox"/>	UNDERGROUND <input type="checkbox"/>
PROPOSED MAIN SWITCH SIZE <input type="checkbox"/> KVA	AMPERES <input type="checkbox"/>	OR <input type="checkbox"/>

b. ALTERATIONS TO EXISTING SUPPLIES ONLY		
<i>PARTICULARS OF THE PRESENT SUPPLY</i>		
SINGLE PHASE OVERHEAD <input type="checkbox"/>	SINGLE PHASE UNDERGROUND <input type="checkbox"/>	
THREE PHASE OVERHEAD <input type="checkbox"/>	THREE PHASE UNDERGROUND <input type="checkbox"/>	
EXISTING MAIN SWITCH SIZE <input type="checkbox"/> KVA	AMPERES <input type="checkbox"/>	OR <input type="checkbox"/>
<b>SUPPLY TO BE ALTERED TO</b>		
SINGLE PHASE OVERHEAD <input type="checkbox"/>	SINGLE PHASE UNDERGROUND <input type="checkbox"/>	
THREE PHASE OVERHEAD <input type="checkbox"/>	THREE PHASE UNDERGROUND <input type="checkbox"/>	
PROPOSED MAIN SWITCH SIZE <input type="checkbox"/> KVA	AMPERES <input type="checkbox"/>	OR <input type="checkbox"/>
IS A CHANGE OF THE SERVICE POSITION ALSO REQUIRED <input type="checkbox"/>	YES <input type="checkbox"/>	NO <input type="checkbox"/>

c. INSTALLATION OF POSITION METER ONLY
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NUMBER OF SINGLE PHASE METERS REQUIRED   
 REASON FOR REQUESTING ADDITION MET

NUMBER OF THREE PHASE MER  REQUIRED

THE SUPPLY AUTHORITY REESERVES THE RIGHT TO INSTALL EITHER AN OVERHEAD OR UNDERGROUND SERVICE CONNECTION THE CUSTOMER MAY BE REQUIRES TO PROVIDE SUBSTATION ACCOMMODATION IN CERTAIN CIRCUMSSTANCES SUPPLY CONNECTIONS ONLY BE GIVEN TO POINTS OF SUPPLY THAT HAVE BEEN AGREED WITH THE SUPPLY AUTHORITY WHERE INTAKE POSITIONS ARE WITHOUT SUCH AGREEMENT THE WAY BE SUBBBBBBJECT TO ALTERATION AT THE FULL EXPENSE OF THE APPLICATION IN ORDER TO MINIMISE INCONVENIENCE PLEASE ENSURE THIS FORM IS COMPLETED IN FULL.

SIGNATURE OF THE APPLICANT.....DATE

.....

POSTAL ADDRESS OF THE APPLICANT;.....

.....

BUSINES TLEPHONE NUMBER .....HOME TELEPHONE NUMBER.....

**SCHEDULE OF EQUIPMENT TO BE INSTALLED IN THE INSTALLATION**

TYPE OF INSTALLATION	NUMBER	NO. OF CIRCUITS	ESTIMATED WATTAGE	REMARKS
LIGHTING POINTS				
SOCKETS OUTLETS				
COOKER POINTS				
WATER HEATERS				
AIR CONDITIOING				
OTHER APLIANCES				

**MOTORS**

1 OR 3 PHASE						
Kw RATING						
PLANT DRIVEN						

**OTHER SIGNIFICANT PLANT;**.....

.....  
 .....  
 .....

**FOR OFFICIAL USE**

DATE APPLICATION RECEIVED .....

DATE PROCESSED BY D/O..... MAP REFERENCE NUMBER

.....

FEEED TRANSFORMER

NO.....

TRANSFOMERS RATING

Kva.....

DATE QUOTATION DESPATCHED ..... ACE NUMBER  
.....

VOTE  
.....

CLASS OF SUPPLY  
A/B.....

MAIN SWITCH RATING  
.....

RED/ YELLOW/BLUE  
PHASE.....

DATE TURNED ON .....  
.....

INSPECTORS NAME