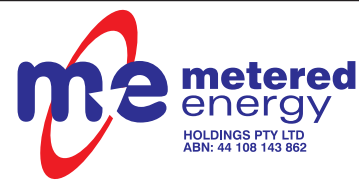


Energy Application (Move In) Form



BUILDING NAME:

CUSTOMER DETAILS (PLEASE USE BLOCK LETTERS) If the account will be in two names, please complete occupant 1 and 2 details.

OCCUPANT NO 1 DETAILS

Title	Australian Drivers Licence No. <input type="checkbox"/>	State of Issue
First Name	And/Or Passport No. <input type="checkbox"/>	Country of Issue
Last Name	Employer	Daytime Phone
Date of Birth	Employer Contact No	Evening/Mobile Phone
Concession Card	Tick for preferred billing address <input type="checkbox"/> Email Address <input type="checkbox"/>	Tenancy Status
Pensioner Concession <input type="checkbox"/>	Seniors Card <input type="checkbox"/> Number	Owner <input type="checkbox"/> Tenant <input type="checkbox"/>
Reparitiation Health Card <input type="checkbox"/>		

OCCUPANT NO 2 DETAILS

Title	Australian Drivers Licence No. <input type="checkbox"/>	State of Issue
First Name	And/Or Passport No. <input type="checkbox"/>	Country of Issue
Last Name	Employer	Daytime Phone
Date of Birth	Employer Contact No	Evening/Mobile Phone
Concession Card	Tick for preferred billing address <input type="checkbox"/> Email Address <input type="checkbox"/>	Tenancy Status
Pensioner Concession <input type="checkbox"/>	Seniors Card <input type="checkbox"/> Number	Owner <input type="checkbox"/> Tenant <input type="checkbox"/>
Reparitiation Health Card <input type="checkbox"/>		

COMPANY OCCUPANT DETAILS

Company Name	Daytime Phone	
Contact Person's First Name	Fax/Mobile Phone	
Last Name	Email Address	
Job Title	Company ABN	Tenancy Status
		Owner <input type="checkbox"/> Tenant <input type="checkbox"/>

SUPPLY ADDRESS DETAILS

Building Name	Unit No	Purchase/Move in Date
Number / Street	Suburb	State Post Code
Postal Address (if different to Supply Address)	Suburb	State Post Code
Previous Address	Suburb	State Post Code
Relative/Friend Contact Name	Contact Number	Relationship

CUSTOMER ACKNOWLEDGEMENT & ACCEPTANCE

By signing this document you:

- Agree to the terms and conditions contained therein;
- Authorise us to collect, maintain, use and disclose your personal information in the manner set out in the Privacy Statement contained in the Energy Agreement;
- Acknowledge that it is your responsibility to notify Metered Energy prior to moving out. You may be liable for charges up to and including the date you advise us.

CUSTOMER ACKNOWLEDGEMENT & ACCEPTANCE

THE AGREEMENT IS SUBJECT TO A COOLING OFF PERIOD OF 10 BUSINESS DAYS

Signed by Occupant 1

Signed by Occupant 2

Print Name

Print Name

Today's Date

Today's Date

