FORM | Notice of Alterations

Name of Customer _____ Ph No _____

Address _____ Post Code _____

Email _____

Name of Electrical Contractor or Worker _____

Contractor's or Worker's Licence Number _____ Ph No _____

Type of Premises _____

1	How many phases in existing "consumer's mains"?		1 2	3
2	Is current carrying capacity of the existing "consumer's mains" adequate for the proposed increase in loading?		Yes	No
3	Are "consumer's mains" to be replaced?		Yes	No
	If yes Cowell Electric must be consulted before replacement. The number of phases and voltage of the service will be determined by Cowell Electric.			
4	Is temporary disconnection required	(a) at metering instrument	Yes	No
		(b) at consumer's terminals	Yes	No
5	Is metering instrument position to be altered?		Yes	No
6	Metering instruments required	_____		
7	Approximate date when installation will be ready for inspection		_____	

Appointments for inspection or temporary disconnections should be made as early as possible.

Additional Load		Total Load •		
Load Group AS3000	Rating of Connected Load	Load Group AS3000	Rating of Connected Load	Maximum Demand†

• In general, this information will only be required for installations having a maximum demand less than 140 amperes.

† Maximum Demand is to calculated at 240 volts in accordance with Australian Standard 3000

'Attention is drawn to the provisions of Cowell Electric Service Rules and Conditions of Supply.

Customers or their agents should not make commitments for electrical equipment until the type of 'service has been determined by Cowell Electric.

Remarks _____

_____ Date _____

FORM | Notice of Alterations

To

Calculated Maximum Demand at 240V _____ Amperes Service Characteristics _____ Phase _____ Amperes

Location of Consumers Terminals:

Fuse Box Service Pillar Padmounted Transformer Indoor/Ground Level Transformer Station

Appointment	Appointment
20 _____	20 _____
Am/pm	Am/pm

Assessed Charges $ _____ Special Charge Number _____ Paid / /

Inspectors Report
Electrical Requirements for Consumer's Mains
This form is to be filled out in conjunction with Application for Supply and Notice of Alteration.

Name of Customer _____
Address _____

1	How many phases required?	1	2	3
2	Size of Consumers Mains		mm²	
3	Ampere required for Consumers Mains		Amperes	
4	Location of Service Fuse			
	a) Overhead on Building			
	b) On Pole			
	c) On Meter Panel			
	d) Fuse Enclosure			
	e) Other Position _____ Please state			

Remarks _____