

Meter Related Complaints or Testing of Meter

Complaint Ref. No.:
(To be given by Licensee)

1. Name, address and telephone No., if any of the complaint.
2. Book Number/Service Connection Number
3. Brief description of the complaint-Burnt out/completely stopped/Fast/Seal broken/Testing of Meter
4. Initial cost of meter was borne by consumer/Licensee
5. Complainant desires to provide/has provided a new meter for replacement (Yes/No)
6. Any other information

Date:

(Signature of Applicant)

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(For Office Use)

1. Site verification report

Signature
(JMT/SMT)

2. Comments of AE (Meter)

Signature
AE (Meter)

3. Reference of informing the consumer within seven days

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ACKNOWLEDGEMENT TO BE HANDED OVER TO THE CONSUMER

1. Complaint reference No.
(To be given by Licensee)
2. Complaint received by
(Name & Designation)
3. Complaint receiving date
4. Target time to resolve

Signature of Representative of Licensee