Site Specific Builders Temporary Supply Agreement



Connection Details

Orion ORN/ES number (if existing application):

Site address:

Safe Power Services bu supply box required?	uilders temporary	Yes	Νο	
supply box required.			with two double 10amp outlets. If you requin cialised outlets, please make note of requiren	

Preferred connection:

Our default process is to lodge the temporary and permanent connections within the same/initial application to Orion. This allows us to avoid potential delays at the end of the job as Orion approval for the permanent connection is granted at the beginning of the job. Please inform us if any job will not require a new permanent connection at the end of the lease.

Unmetered temporary?	Metered temporary?

Preferred livening date:

Note: this date is not guaranteed and is dependent on availability and existing scheduled work-load.

Connection	period	(please select):
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Six-months	6-12-months	12-18-months	18-months plus			
Temporary connection	size:	Phase	Amps			
Permanent connection	size:	Phase	Amps			
Number of permanent connections: Please include Landlord supply if required						
Hot water type (please select):						
Electric	Gas	Solar				
Preferred permanent livening date:						
<u>CT Connection Details</u> (required for connections greater than 100amps)						
Delivery address for CTs:						
CT ratio:						
Bore size:	45mm	68mm	88mm			
Base/bar mounted:						

Service mains size and type:

03 343 3814 | office@safepowerservices.co.nz | Unit 8 – 1 Stark Drive, Wigram, Christchurch 8042

By completing this Agreement you confirm that the information you have provided is accurate, you understand and agree to all of the terms and conditions as outlined below: Safe Power Services Terms and Conditions and Builders Temporary Supply Terms and Conditions



Who is installing AND terminating service mains to the Orion Network?:

Billing - Customer Details (who are we/Safe Power Services invoicing)?

Company name:

Contact name:

Contact phone number:

Email:

Postal address:

Purchase order number:

Electrician's Details

Company name (if applicable):

Contact name:

Contact phone number:

Email:

Energy Retailer Account Details

Name on account:

Contact phone number (of account holder):

Postal address (of account holder):

Energy retailer:

Energy retailer account number:

Any additional information:

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