## **Site Works Requirements & Agreement**



## **New Connection Details**

| MainPower MACK num                                  | <b>nber</b> (if existing a | pplication):               |                 |            |      |
|---|----------------------------|----------------------------|-----------------|------------|------|
| ot number:  |                            | Street number:             |                 |            |      |
| Street address<br>& suburb                          |                            |                            | Temporary?      | Permanent? |      |
| Temporary connection size:                          |                            | Phase                      | Amps            |            |      |
| Permanent connection size:                          |                            | Phase                      | Amps            |            |      |
| If permanent, do you currently have                 |                            | temp supply on site?:      | Yes             | No         |      |
| If yes, please supply IC                            | P number:                  |                            |                 |            |      |
| Permanent connection Please include Landlord supply |                            | its:                       |                 |            |      |
| Hot water type (please                              | select):                   |                            |                 |            |      |
| Electric  | Gas                        | Solar                      |                 |            |      |
| Preferred permanent I                               | ivening date:              |                            |                 |            |      |
| Is isolation required?:                             |                            | Yes                        | No              |            |      |
| If yes, is this fed via a: Central Supply           |                            | Distribution Box           | Distribution    | Cabinet    | Pole |
| Is an underground thre                              | ough-joint requi           | red to be completed by u   | s/Safe Power?:  | Yes        | No   |
| Are any additional wo If so, who is conductin       |                            |                            |                 |            |      |
| Commercial Connection                               | on Details (requir         | red for connections greate | r than 100amps) |            |      |
| Delivery address for C                              | Ts:                        |                            |                 |            |      |
| CT ratio:   |                            |                            |                 |            |      |
| Bore size:  | 45mm                       | 68mm                       | 88mm            |            |      |
| Base/bar mounted:                                   |                            |                            |                 |            |      |
| Service mains size and                              | type:                      |                            |                 |            |      |
| Who is installing AND                               | terminating cor            | vices mains to the Orion   | Network?        |            |      |

## **Site Works Requirements & Agreement**



| 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:  |