Builders Temporary Supply & Permanent Connection Agreement



MainPower MACK number (if existing application):

| Lot number: | | Stre | eet number: | | |
|--|---|----------------|-----------------------|---|--------|
| Address and suburb | : | | | | |
| Temporary Connec | ction Details: | | | | |
| Safe Power Services builders temporary supply box required? | | orary | Yes | No | |
| Our standard BTS's are specialised outlets, plea | | | | vou require multi-phase temporary p ts'. | ower o |
| If yes, please select | connection per | iod: | | | |
| Six-months | 6-12-month | IS | 18-months | 18+-months | |
| | MainPower is to app t. There will be two | separate Mai | inPower MACK num | nce approved, we apply for a new con bers allocated to each application. Ple of the term. | |
| Unmetered temporary? | | | Metered temp | oorary? | |
| Preferred temporar | y livening date: | | | | |
| Note: this date is not gu | aranteed and is de | pendent on a | vailability and exist | ting schedule | |
| Temporary connection size: | | | Phase | Amps | |
| Permanent Conne | ction Details: | | | | |
| Permanent connect Please include Landlord | | | | | |
| Permanent connection size: | | | Phase | Amps | |
| Hot water type (please select): Elect | | Electric | Gas | S | |
| Will solar be installed?: Ye | | Yes | No |) | |
| If yes, please provide D | istributed Generat | ion (DG) lette | er from MainPowe | r. | |
| | | | | | |

Preferred permanent livening date:

Please note : If this is a new sub-division , please supply a stamped Council street numbering plan.

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



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

Company name:

Contact name:

Contact phone number:

Email:

Address and suburb:

Purchase order number:

Electrician's Details

Company name (if applicable):

Contact name:

Contact phone number:

Email:

Energy Retailer Account Details

Name on account:

First and last name (if different from above):

Contact phone number (of account holder):

Email address (of account holder):

Address & suburb (of account holder):

Energy retailer:

Energy retailer account number:

Any additional information/comments:

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