## **Builders Temporary Supply & Permanent Connection Agreement**



Orion ORN/ES number (if e	xisting application):			
Lot number:	:	Street number:		
Address and suburb:				
Temporary Connection D	etails:			
Safe Power Services builders temporary supply box required?		Yes	No	
Our standard BTS's are: single processes specialised outlets, please makes			ou require multi-phase temporar ts'.	y power or
If yes, please select conne	ction period:			
Six-months 6-3	L2-months	18-months	18+-months	
Orion. This allows us to avoid p	otential delays at t	he end of the job as Or	ns within the same/initial applica rion approval for the permanent o t require a new permanent conne	connection
Unmetered temporary?		Metered temporary?		
Preferred temporary liven	ing date:			
Note: this date is not guarantee	d and is dependent (	on availability and exist	ting schedule	
Temporary connection size	e:	Phase	Amps	
Permanent Connection E Permanent connection - n Please include Landlord supply	umber of units:			
Permanent connection size	<b>::</b>	Phase	Amps	
Hot water type (please selec	t): Electric	Gas	S	
Will solar be installed?:	Yes	No	•	
If yes, please provide Distribute	ed Generation (DG)	letter from Orion		
Preferred permanent liver	ning date:			

Preferred permanent livening date:

Please note: If this is a new sub-division, please supply a stamped Council street numbering  $plan. \ We will not be able to submit your application to Orion without this$ 



## **CT Connection and Metering Details:**

Who is installing AND t	erminating service mair	is to the Orion Network	?		
Delivery address for CT	s:				
CT ratio:					
Bore size:	45mm	68mm	88mm		
Base/bar mounted:					
Service mains size and type:					



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:

Please note: The contact provided within this section is the 'connecting customer'.

If applicable, this contact will receive the Orion Capital Contribution agreement to be signed, returned and paid to Orion.