## SYSTEM CONNECTION FORM.



Please complete all details and email to **newconnections@mercury.co.nz** 

## **CONNECTION DETAILS.**

Customer responsible	e for ongoing charges.					
Are you an existing customer?	Yes No	Phone number				
Status	Owner Occupier Builder	Email address				
Surname		Signature				
First name/s						
Registered company name (if applicable)		Date				
Postal address		I have read and accept Mercury's General Residential Terms and Conditions and Specific Terms - Electricity and Piped Gas. I accept responsibility for all ongoing supply and service charges while I remain the registered customer at this property. I indemnify Mercury against any costs, losses or claims incurred as a result of the information provided being incorrect.				
Electrical contractor	details.					
Full name		Signature				
Phone number						
Email address		Date				
I understand and accept that if the customer or the customer's agent has not completed the section above, then I will be registered to the property, and be liable for all ongoing supply and service charges under Mercury's General and		Network connected by (nominated)				
Specific Terms for the	supply of Electricity and Piped Gas.	Local network owner				
	e nominated network contractor is all network owner to undertake the word on to that network.	Authorised metering contractor (nominated)				
Network details.						
ICP		Line charge kVA/NUD				
NSP		Line charge kVA/CPD				
Dist. Loss code		Transform no.				
Dist. Load group		Pole no.				

Connection type.			Requested loading.				
New installation OR	Alteration		Number of phases req	luired	1	2	3
Metered BTS OR	BTS to perma	anant supply	Expected load (Amps per	r phase)		А	(e.g 20,30,40)
Domestic OR	Non domesti	C (define type)	State load if over 100 /	Amps [		А	(kVA)
Non domestic type			If unmetered, state tot	al load		VA/W	(Hrs/Day)
Installation location details.			Requested pricing op	tion (if I	ess than 50	00 Amps).	
Lot no.			Anytime	Day/Ni	ght	Controlled	lload
DPS			Other 1				
			Other 2				
Installation address			Note: If this section is not completed, or the supply is greater than 500 Amps, Mercury will nominate suitable pricing options.				
Description (front/rear etc.)							
Number of units on site							
Anticipated date of commissioning							
Site plan: Please tick to indica	ate the position of t	he nearest Pole/DP,	proposed cable route, a	and met	er box locat	ion.	
PROPERTY BOUNDARY	PROPERTY BOUNDARY	Key.	Comments				
♦ BUILDING SI		<ul><li></li></ul>	(Detail Alterations, 11kV requirements, or any additional information.				
<ul><li>○</li><li>○</li><li>○</li></ul>		○ Fole	If advantageous, please attach a sketch of the proposed works)				
		-					
0 0 0	0 0						
					ketch attacl	ned	
Notes  Approximate the actual site on this plan or provide a sketch.  Please tick the appropriate item to show where approximately the meter box, pole and DP are located (for rural areas please write the pole number).		n to show where sole and DP are	<ul> <li>Unrestricted access is required to the meter box.</li> <li>If cabling crosses the property boundary As Builts may be required.</li> <li>Any sketch is completed for recording purposes only. Mercury accepts no liability for authorising supplied information that is in error.</li> </ul>				

Note: This application will be automatically returned if NOT signed, or if all required fields are not completed.