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	Ministry c	of Public Utilit		
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	RESIDENTI	AL ELECTRIFICATION	-	
		ICE PROGRAMME		
		R APPLICATION FORM		RESIDENTIAL ELECTRIFICATION PROGRAMME
SURNAME:				
Date of Birth:	_ Age: Sex: <i>N</i>	Nale Female I.	D. Card/PP/DP#	
Group Name (where applicable	le):			
Address:				
Mailing Address (if different):				
Home Tel no				
Occupation:		Income/	Salary \$	
Service Required:	-			
ELECTRICITY POLES	PLEASE AT	TACH T&TEC ESTIMA	ТЕ	
HOUSEWIRING	First time Wi	ring Rev	viring	
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• Number of Rooms: Bedroom • Social Data: Single Arried Divorce Single Parent Old Age Pen Welfare Recipient: YES N	Flat house Elevator n(s) Bathroom(s) ed Separated nsioner Fire Victim O If yes, state typ	ed One Level 🗌 Two Le Living room Kitch Common Law 🔄 Widowa Natural Disaster Via	evel 🗌 Other: en Gallery C ed 🗌 Other: ctim 📄 Disability G and amount [Dther: prant Recipient \$
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• Number of Rooms: Bedroom • Social Data: Single Arried Divorce Single Parent Old Age Pen Welfare Recipient: YES No	Flat house Elevator n(s) Bathroom(s) ed Separated nsioner Fire Victim O If yes, state typ	ed One Level 📄 Two Le Living room Kitch Common Law 📄 Widowe Natural Disaster Vic pe tts and non-dependents (e.	evel Dother: en Gallery C ed Dother: ctim Disability G and amount [g. Wife, child, aunt, gr	Other:
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DOCUMENTS REQUIRED

The forms must be completed and submitted to the Ministry of Public Utilities along with the following documents:

- a. Completed Application Form
- **b.** Copy of Identification Card (ID/DP/Passport)
- c. Copy of Land Document (Deed)
 - i. In the event that the owner of the land has died, the applicant must present a death certificate and a letter of administration certifying that he / she has permission to conduct business of any sort on the land.
 - ii. If the deed does not belong to the applicant, he/she must provide a letter from the owner of the land giving T&TEC permission to install the necessary electrical infrastructure on the land. The applicant must also provide a valid copy of the Identification Card of the owner.
- **d.** Copy of Land Document for Squatting Communities (Certificate of Comfort or Letter of non-objection from State Agency/Enterprise indicating occupancy for five years and over.
- f. Proof of Income (Job Letter & Payslip)

FOR	OFFI	CIAL	USE	ONLY	

2.	Date of Site Visit:		
4.	Request Recommended: Yes No Reason:		
5.	Signature of Project Officer:	Date	dd/mm/yy
6.	Application Approved: Yes No	Date: _	dd/mm/yy