

Application for a Supply of Electricity to Non-Domestic Premises

Please complete all sections using block letters and/or ticking boxes where appropriate. If you need help, please call 505460. **All sections marked with a * require a response.**

Customer Number *							Premise Number *						
1. Full name of	custon	ner a	pplying	for sup	ply*								
Corporate name													
2. Address at w	hich sı	vlaau	is reau	ired*									
Address		117	•										
				Postcode									
Contact No				Email									
PLEASE NOTE: We will s	end your	r bill to t	he email in	n Section 2.	If you requ	ire your l	bill by p	ost, please	fill in Sect	ion 3.			
3. Address for a	ccoun	ts											
Address													
				Postcode									
			•										
4. Address of re	gister	ed of	fices or	busines	ss addre	ess (If n	not su	ipply add	dress - r	ef sectic	on 2)		
Address													
Data Circumstan				Postcode		Place of incorporation							
Date of incorporation				Registration				Place of Inc	orporation				
5. Date supply i	s need	led by	/ *										
Day				Month				Year					
PLEASE NOTE: Please a	llow 3 wo	orking d	ays betwe	en receipt c	of this form	at our of	fices, a	nd your red	quired date	for conne	ction		
6. Do you have existing premises on supply?*													
Yes			No										
Address					1								
Postcode	Premises No												

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Application for a Supply of Electricity to Non-Domestic Premises (cont)

7. Are you vac	ating existi	ng premi	ses?*							
Yes		□ No □								
If yes, Please indicat	e an appropriate	e date for us t	o schedule	a final mete	er reading.					
Please detail the add	ress where the f	inal reading i	s needed.							
Address										
Postcode				Premises N	No					
8. Description	of new pre	mises (Sh	nop / Off	ices etc)						
Domestic	omestic			staurants a	nd bars		Health and social work			
Agriculture and fishi		Transport	, storage ar	nd communication		Other so	cial and personal services			
Manufacturing		Financial	and legal ac	tivities		Governn	nent			
Electricity, gas and water supply			Computer and related activities				Cannabi	nnabis Industry		
Construction & Quarrying			Real estat	e and other	business activities		Unclassi	fied		
Wholesale and retail trades			Education	n, health and	d other services		Other			
If other please speci	fy:		'							
9. Declaration										
Please complete ar	nd return to: Cu	istomer Care,	The Power	house, PO I	Box 45, Queens Road	St.Heli	ier, JE4 8N`	or email to jec@jec.co.uk		
* I/We apply for a supply of electricity at the above premises, chargeable at the tariff from time to time in force, appropriate to the supply and subject to the conditions laid down in the					Print full name and p Company (If applica		on in	Print full name and position in Company (If applicable)		
Company's tariff leaflet. * I/We further agree to be bound by and observe the Company's official Terms and Conditions of supply.										
* I/We agree to pay on demand for all electricity consumed.					Signature			Signature		
* I/We understand that applicants may be required to pay a deposit by way of security for electrical charges.										
PARTNERSHIPS ONI	LY	J								
* I/We jointly and severally agree to be liable for all charges payable in accordance with the Company's official Terms and Conditions										
of supply and tariff rates from time to tim					Date			Date		
*(DELETE WHERE AP	PLICABLE).									

By signing this document you are confirming that you are authorised to sign on behalf of the above organisation.

Our Terms and Conditions can be found at www.jec.co.uk/terms-conditions.

Our Privacy Notice can be found at www.jec.co.uk/privacy-notice.

Our Smart Meter Privacy Notice can be found at www.jec.co.uk/smart-meter-privacy-notice.

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