



Please read this guideline before filling up this application form.

- To avoid any delay in processing your request, please ensure that all fields in this form are completed and **a copy of your Identification card/Passport is attached**. You will need to be present during the supply disconnection if the meters are located inside your premises.
- Please complete the form and send by hand or registered mail to Department of Electrical Services (DES) office (nearest to the premise which account is to be closed), together with a copy of your Identification card/Passport. Please be informed that a minimum of three (3) working days is required for your application to be processed.

1. I would like to apply for termination of electricity supply for the premises below:

Name : _____
Account No. : _____
Premises Address : _____

This Premise is currently occupied by myself or vacant occupied by others

2. Preferred date of supply's disconnection and meter's removal: _____(day)_____(month)_____(year)
The earliest appointment date (subject to availability) is within three (3) working days after we received this application form.

3. Please provide your latest correspondence address for final bill or refund cheque purposes:

Latest Correspondence Address: _____

Contact No. (Home/Mobile) : _____/ _____

4. DECLARATION:

- I hereby declare that all the details furnished above are true and if any of the above information is found to be false or misleading, DES shall reserve the right to take any other action as may be deemed appropriate.
- I hereby give my consent to DES and/or agree to assist DES to enter into the said premises for the purpose of disconnection of electricity supply. In the event that the electricity supply could not be disconnected or meter could not be removed from the premises despite all reasonable efforts by DES to do so or due to unavoidable circumstances, I hereby shall be responsible to pay for all charges with regards to the electricity consumption at the premises until the actual execution of supply's disconnection and meter's removal.

THUMB PRINT

Signature or thumb print / Date:

*For account under company, the signature of its legal
Authorized representative of the company and the
Company's rubber stamp imprint is required.*

Name : _____

IC Number/Passport : _____

(Account holder or the person signing for the company)

Company's Rubber Stamp