

This form is available free of cost

Format for Meter Related Complaints or Testing of Meter

Complaint Ref. No.: _____

(To be given by Licensee)

1. Name, address and telephone No., if any of the complaint.
2. Book Number / Service Connection Number
3. Brief description of the complaint-Burnt out / completely stopped / Fast / Seal broken / Testing of Meter
4. Initial cost of meter was borne by consumer / Licensee
5. Complainant desires to provide / has provided a new meter for replacement (Yes / No)
6. Any other information

Date:

(Signature of Applicant)

(For Office Use)

1. Site verification report

Signature
(JMT / SMT)

2. Comments of AE (Meter)

Signature
AE (Meter)

3. Reference of informing the consumer within seven days

ACKNOWLEDGEMENT TO BE HANDED OVER TO CONSUMER

1. Complaint reference No.
(To be given by Licensee)
2. Complaint received by
(Name & Designation)
3. Complaint receiving date
4. Target time to resolve

Signature of Representative of Licensee