

CONTRACT FOR SUPPLY

Consumer's Name:				
Employer:	Employer's Phone No:			
Spouse:	Spouse Employer:		Ph. No:	
Billing Address:				
Tele #:(C)	(C)(H) Email Address:			
Building Location:				
Do you own or are you renting thi	s premises:			
Do you have an existing supply: Yo	es No Address:			
Owner's Name:				
References:				
Name:	Relationship:_	Tele No:		
Name:	Relationship:_	Tele No:		
Driver's No:	National In	surance/Socia <mark>l</mark> Sec No		
Voter's Card No:				
Class of Service: Residential:		Commercial:		
Type of Service:	_ Volts/ Amp <mark>s:</mark>	Wire:	Phase:	
I/We authorize this connection with this account as set forth in Under section 25 of the Credit R successor, replacement, substit undersigned for a permissible p	the Baha <mark>mas Power and</mark> Reporting Act, I consent to ute or assignee requestin	Light Company Ltd Ro CRIF Information Se	ules and Regulations. rvices Bahamas Ltd. or its	
Date:	Signe	d:		
THIS APPLICATION MUST BE ACGOVERNMENT ISSUED PHOTO I		SMART CARD AND A	N ADDITIONAL	
	FOR OFFICIAL U	SE ONLY		
Deposit Amount\$:	Date Paid:	Receipt N	Receipt No	
Customer ID:	Meter No:	S.W.O No	:	
Location ID:	Permanent	Temporary	Tariff	
Reconnection:	Transfer	New Conne	New Connection	
Specification No:	Initial Reading:	Connec	Connection Date:	
Supervisor:	Office Manager:	Mar	Manager:	

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