CONSULTATION FORM FOR CONNECTION TO THE TRANSMISSION SYSTEM

For official use only	
Consultation Number. :	
Date Received :	

To: SP Group 2 Kallang Sector Singapore 349277 Attn: SP PowerGrid

CONSULTATION DETAILS								
Sub-metered consumers (ten supply from their landlord/MC			this application. All tenants in ses.	multi-metere	d premise	s are required to obtain		
Reference to the consultation,	I hereby enclose	one cop	by of site & location plans includ	ding proposed	d custome	r's intake connection point		
Drawing No				for your a	advice on	connection requirements.		
SITE DETAILS								
Connection Applicant/Develo	per*:							
Project Description:	<u>·</u>							
Site Location – Lot & Mk No.:								
Street Name: Blk/Unit No.:						· 		
LOAD REQUIREMENT (One in	ntake connection	point pe	er premises)					
□ New Connection			Upgrading the existing servi	ce cable		Temporary Connection		
☐ Change of intake conn	ection point		Other Services (Please specif	y):				
Type of Premises: Industrial/Co	pe of Premises: Industrial/Commercial/Residential/Others*: Gross Floor Area (m²):							
Type of Business Activity (for non-residential premise only):				Voltage Sensitive? Yes / No*				
Existing Utility A/C No. (if any):								
Existing Approved Load (kVA)	d Load (kVA): at 230V/400V/22kV/66kV/230kV*							
Load Requirement (kVA):			at 230V/40	0V/22kV/66k\	//230kV*			
Target date of Energisation:	/	/_	Previous consultation	No. (if any): _				
Additional information:								
LEW DETAILS								
I confirm that the above inforn	nation is correct a	and agre	e to advise SP PowerGrid shoul	d there be sul	osequent (changes.		
Name of Authorised LEW:	orised LEW: Licence Number:							
Company Forwarding Address	s:							
			Postal Code: Singapore					
Tel:	Fax:		Mobile Phone:		Pager:			
Email:								

Signature of Authorised LEW: ______ Date _____

^{*} Delete where not applicable