

Administration of Daman & Diu
ELECTRICITY DEPARTMENT
 Wiring Contractor's Completion and Test Report

To,

The Assistant Engineer (Electrical) / The Junior Engineer (Electrical) / Electricity Department,

Administration of Daman & Diu
 DAMAN / DIU (Local Office)

I / We wish to inform you that the installation at _____
 _____ occupied

by _____
 has been completed by me us in all respects and is now ready for test

I / We enclose herewith in duplicate the detailed wiring diagram for this installation, alongwith description of the wiring *

The details of the installation and test obtained are as follows :

NATURE OF DEMAND	No. of Points	Wattage of Points	Total Wattage	Insulation Resistance		Remarks-re : No. of discription Boards, Starters, Iron Clad Switches Etc.
				To Earth	Between Poles	
LIGHTING						
a) Drops _____						
b) Brackets _____						
c) Watertights _____						
d) Other Fluings _____						
Fans _____						
Wall Plugs _____						
DOMESTIC APPLIANCES						
Cookers _____						
Reftigerators _____						
Water Heaters _____						
Other Purposes _____						
Wall Plugs _____						
MOTORS						
	Nos.	B. H. P. each	Total B. H. P.			
Industrial _____						
Pumps _____						
Other Purposes _____						

* Size of wire, stranding, single or multi-core type of insulation, open/teak wood casing and capping conduit wiring, size of conduit etc., adopted should be given under description.
 The wiring diagram and description of wiring should be signed by the wiring Contractor.
 The installation was tested by me / us on _____ 19 _____ in accordance with I. E. Rules, 1956 (as amended upto - date).

Customer's Signature _____ Address _____	Supervisor's Signature : Certificate No. _____ Address _____	Wiring Contractor's Signature Licence No. _____ Address _____ Contractor _____
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THIS SIDE FOR USE OF ELECTRICITY DEPARTMENT ONLY

Application No. _____ Tariff Applicable _____ Place _____
 Load Sanction _____ Security Deposit Rs. _____ Receipt No. _____ Date _____
 No. of outlets _____ Service Charges Rs. _____ Receipt No. _____ Date _____
 Type of premises _____ Installation No. _____
 Total No. of Points / motors _____ Date of Connection _____
 Total/Connected load _____ Service/Tapping _____
 Load connected on phase (watts) _____ Telephone crossing _____
 A. _____ B. _____ C. _____ From Pole No. _____
 Service distance _____

Distribution Transformer KVA _____

Location _____

Peak hour load (Amps) _____

R. _____ Y. _____ B. _____

Meter : Owner : Department/Consumer _____

Type and Make _____

Capacity _____

Initial reading _____

Sr. No. of Meter _____

Sr. No. of Meter seal (MRT) _____

Service Line Material	Quantity	Site Account Register	
		Page No.	Item No.

1. Conductor _____
2. Cable _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

TO BE ATTESTED BY DEPARTMENT AND BY CONSUMER

General :

Meter cover sealed on _____ Seal No. _____

Meter Box Sealed on _____ Seal No. _____

Does installation comply with whing Rules _____

Are any defects noticed ? _____

Rotation of Meter checked O. K. ? _____

Certified that the installation was tested and found in order :

Meter Inspector Jr Eng O & M _____
 Incharge

Test :

Between Phases M _____

Phase to Earth M _____

Neutral to Earth M _____

Consumer's Signature _____

State whether Residence Shop Office, Restaurant, Cinema Theatre Hospital, Religious Educational, Factory (described) Agricultural Pumping (described), cottage industry (describe) _____

WARNING

Near Con. No. _____

NO CONNECTION CAN BE RELEASED WITHOLIT FILLING THIS PROFORMA

Expd. Sanction No. & Date _____

Tech Sanction No. & Date _____

Consumer's personal Ledger prepared on _____ Bradma NO. _____

Signature (Clerk) _____

First Bill, Bill No. & (Date) _____ Completion report in Book Form

Signature (Clerk) _____ Book No. _____ Page No. _____ Dated _____

Billing Incharge _____

Chacked & passed for
 Releasing connection

Junlor Engineer

ASSISTANT ENGINEER