

## 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/Past/Seal broken /Testing of Meter.
4. Initial cost of meter was borne by consumer/Licensee.
5. Complaint desires to provide/has provided a new meter for replacement (Yes/No)
6. Any other information

Date \_\_\_\_\_

(Signature of Applicant)

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**(For Office Use)**

1. Site verification report
2. Comments of AE (Meter)
3. Reference of informing the consumer within seven days

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### **ACKNOWLEDGEMENT TO BE HANDED OVER TO THE 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 Licensees