

**Payment options:**

How would you like to pay your energy account(s)?

- Direct debit or direct credit
- In person, at our office
- By post
- Telephone transfer on internet banking
- Easypay

Please contact us if you would like to discuss your payment options.

**Appliance details:**

How do you heat your house?

- Natural gas
- LPG
- Electricity
- Wood
- Other (please specify) \_\_\_\_\_

How do you heat your water?

- Natural gas
- LPG
- Electricity
- Wood
- Other (please specify) \_\_\_\_\_

What type of cooker do you have?

- Natural gas
- LPG
- Electricity
- Wood
- Other (please specify) \_\_\_\_\_

**Terms and Conditions**

Please read the terms and conditions below and sign at the bottom of the page to confirm your acceptance of them.

I/we hereby apply to be supplied with gas and/or electricity (as indicated herein) by Energy Direct NZ Limited on the terms and conditions set out below and otherwise in accordance with Energy Direct NZs' Residential Conditions of Supply in force from time to time.

If accepted as a customer I/we agree to purchase my/our energy requirements as described above for a minimum period of 12 months and pay a bond if required.

I/we confirm that the information I/we have provided Energy Direct NZ is correct and certifi that I am/we are authorised to initiate any transfer of supply to Energy Direct NZ. I/we understand the Energy Direct NZ is under no obligation to accept any person as a customer.

I/we authorise my/our current energy supplier to disclose to Energy Direct NZ any metering, payment history, billing and usage information relating to me/us (including but not limited to the above house) and agree that Energy Direct NZ may instruct such supplier to cease supplying and delivering me/us energy.

I/we authorise Energy Direct NZ to attend all matters necessary or desirable to effect the supply of energy to my/our house. This includes finalisation of my/our account with my/our current energy supplier(s) on the basis of meter readings that may be estimated. Should Energy Direct NZs' attempt to complete the switch from my/our current supplier(s) fail for any reason, Energy Direct NZ has the right to cancel the switch request.

I/we acknowledge and agree that Energy Direct NZs' Residential Conditions of Supply authorise Energy Direct NZ to complete a credit check about me/us and to hold and disclose my/our personal information. Energy Direct NZ may provide me/us with offers and information.

By ticking this box I/we will not receive these offers and information.

I/we understand that Energy Direct NZ Residential Conditions of Supply will apply to the purchase of energy pursuant to this agreement. I/we acknowledge that I/we have received copies of:

- Residential Conditions of Supply
  - Pricing Schedule
  - Service Fee Schedule
- and I/we agree to be bound by them.

Authorised signature \_\_\_\_\_ Date \_\_\_\_\_

**Office use**

Docket number \_\_\_\_\_

Debtor number \_\_\_\_\_

Supply ID \_\_\_\_\_

Bond paid? YES  NO  Amount \$ \_\_\_\_\_

Turn ON fee paid? YES  To be billed  Not required

# Residential Application Form

## Customer Application Form



Energy Direct NZ  
179 St Hill Street  
PO Box 32  
Wanganui 4540

Tel: 06 349 0909  
Fax: 06 349 4931  
Freephone: 0800 567 777  
Email: enquiries@energydirectnz.co.nz  
Web: www.energydirectnz.co.nz <http://www.energydirectnz.co.nz/>



## Energy Direct NZ Customer Application Form

### Account details:

Account holder details:  
Mr/Mrs/Miss/Ms (please circle)

Surname \_\_\_\_\_

First names \_\_\_\_\_

Date of birth \_\_\_\_\_ (day/month/year)

Proof of identity (e.g. passport, drivers licence) \_\_\_\_\_

Home phone \_\_\_\_\_

Work/mobile phone \_\_\_\_\_

Facsimile \_\_\_\_\_

Email \_\_\_\_\_

Have we supplied you with energy before? YES  NO

Joint account holder details:  
Mr/Mrs/Miss/Ms (please circle)

Surname \_\_\_\_\_

First names \_\_\_\_\_

Date of birth \_\_\_\_\_ (day/month/year)

Proof of identity (e.g. passport, drivers licence) \_\_\_\_\_

Home phone \_\_\_\_\_

Work/mobile phone \_\_\_\_\_

Facsimile \_\_\_\_\_

Email \_\_\_\_\_

### Address details:

Street address to be supplied with energy \_\_\_\_\_

Town/City \_\_\_\_\_

Postal address if different from street address \_\_\_\_\_

Town/City \_\_\_\_\_

If you are moving to a new house please provide your previous

Address \_\_\_\_\_

Town/City \_\_\_\_\_

Do you rent the house to be supplied with energy? YES  NO

If YES, please provide your landlord's contact details

Name \_\_\_\_\_

Address \_\_\_\_\_

Town/City \_\_\_\_\_

Phone \_\_\_\_\_

### Access details:

Is a key required to access the electricity or gas meter?

YES (we will require a copy of the key)  NO

Do we need to switch off an alarm to access the meter?

YES (we will require instructions, including the keypad location and code)  NO

Do you have a dog(s)? YES  NO

Is there anything else at your house that we should be aware of?

\_\_\_\_\_

### Electricity Account details:

Please complete the following section if you would like Energy Direct NZ to supply you with electricity.

Where is your electricity meter located? Inside  Outside

Does anyone at your premises require electricity for critical medical equipment? YES  NO

Is your premises currently supplied with electricity? YES  NO

If YES,

Who is your current supplier? \_\_\_\_\_

What tariff are you on? \_\_\_\_\_

What is the ICP number on your electricity bill? \_\_\_\_\_

Please provide us a copy of your current electricity bill.

If NO,

How long have you been living at this address? \_\_\_\_\_

When do you require an electricity connection? \_\_\_\_\_

Do you have an electricity meter? YES  NO

If YES,

What is your electricity meter number? \_\_\_\_\_

What is your electricity meter reading? \_\_\_\_\_

Do you consume less than 8000kWh per annum? YES  NO

Please contact us if you would like to discuss your pricing options.

### Gas Account details:

Please complete the following section if you would like Energy Direct NZ to supply you with gas.

Where is your gas meter located? Inside  Outside

Is your house currently supplied with gas? YES  NO

If YES,

Who is your current supplier? \_\_\_\_\_

What tariff are you on? \_\_\_\_\_

What is the ICP number on your electricity bill? \_\_\_\_\_

Please provide us a copy of your current electricity bill.

If NO,

How long have you been living at this address? \_\_\_\_\_

When do you require a gas connection? \_\_\_\_\_

Do you have a gas meter? YES  NO

If YES,

What is your gas meter number? \_\_\_\_\_

What is your gas meter reading? \_\_\_\_\_

Please contact us if you would like to discuss your pricing options.