



WIRING CERTIFICATE OF COMPLETION APPLICATION FORM.

----- **NOT FOR SALE** -----

CUSTOMER DATA			
FULL NAME:		National Id No/Reg No:	
KRA PIN NO.:	Mobile No.:	Email Address:	
Postal Address		Town of Residence	
County:	Sub County	Village	
Street/Estate		Postal Code	

INSTALLATION DETAILS			
Power Utility Off taker		County:	
Sub County	Village:		
Street	Postal Code		
Postal Address		Town	
Proposed Meter Box/Board Location			
Nature of Work:		Physical Location of the Premise	
<input type="checkbox"/> New Installation	Number of Installations Sited (Metering Points)		
<input type="checkbox"/> Additional Load	Commencement Date		
<input type="checkbox"/> Meter Separation	Utility Reference Number		
<input type="checkbox"/> Name/Details Change	Geographical Coordinates		Latitude:
			Longitude:

SCOPE OF WORK					
No	Description	QTY	No	Description	QTY
1.	lighting points		4.	Cooker	
2.	outlet Receptacles (Sockets)		5.	Shower	
3.	Air Conditioners		6.	Motor	

“IMPORTANT.”

This installation should be periodically inspected and tested and a report of its condition obtained as prescribed in the regulations for the Electrical equipment of building issued by Energy petroleum regulatory Authority.

Max Period 2 years

1. Phase to Earth	.....	Megohms.
2. Between phases	.....	Megohms.
3. Neutral to Earth	.....	Megohms.
4. Earth Continuity	.....	Ohms.
5. Earth-lead Resistance	.....	Ohms.
6. Earth Electrode Resistance	.....	Ohms.
7. Earth loop Impendence	.....	Ohms.
8. Phase to Neutral	.....	Ohms.

Kindly attach the following documents for processing of the Wiring Certificate

<input type="checkbox"/> Copy of National Identification Card	<input type="checkbox"/> Copy of Kenya Power Application Form
<input type="checkbox"/> Copy of KRA PIN Certificate	<input type="checkbox"/> Route Sketch Map
Electrician's Name	Signature/Stamp
Electrician's ID No	Date

PAYBILL NO:522522 ACCOUNT NO: 1213677009

