

District Council of Coober Pedy

"Opal Capital of the world"
PO BOX 425 COOBER PEDY SA 5723
COUNCIL OFFICE (08) 8672 4600 FAX (08) 8672 5699 E-Mail: dccp@cpcouncil.sa.gov.au

Owner's Authority Form

The owner must complete this form to authorise the tenant to connect electricity to the property.

Owner's Details:		
Family Name:	Given Name(s):	
Business / Middle Names	:	
Your Date of Birth:	/ Home Phone #:	
Email:	Mobile #:	
Authorisation Details:		
	o complete Electricity Supply form, provide 2 forms of identification and nnection.	d pay a
Name of Occupier:		
Property Address:		
Date of Connection:	I I	
Date of last disconnectio	n://	
When an Electricity Meter is required before the mete	nas been disconnected for more than 6 months a Certificate of Compliance r can be reconnected.	(COC)
Certificate of Compliance	required: Yes / No	
Proof of Identification:		
Council requires two types Provided:	of identification and and	
Owner Signature	Owner Signature	
Cc. c.ga.a.c	o milor orginataro	
Office Use Only: Assess	ment #: Date Received: / /	
Completed by:	Signed: Customer Ref #:	