# Application for CT metering works

### Please complete in **BLOCK CAPITALS**

## This form is required by Horizon Power to arrange for Current Transformer (CT) metering.

#### Before you begin:

- Consult the Western Australian Service and Installation Requirements (WASIR) located at horizonpower.com.au/contractors-installers/manuals-standards/#resources
- You must attach a single line diagram of the proposed metering installation with this form
- Submit the completed form and diagram to metering.services@horizonpower.com.au
- If you have a question about your application, please contact your local Horizon Power office (details over page).

### Name of applicant (for tax invoice purposes)

Customer name:		ABN:			
Surname:		First name:			
Supply address					
Lot number: Sti	reet No: Street n	name:			
Suburb/Town/City:		Postco	ode:		
Phone: Home:	Work:	Mobile:			
Fax:	Email:				
Postal address of applic	ant				
Address:					
Town:		Postcode:			
Phone:	Mobile:				
Fax:	Email:				
Is the request for the CT	meter installation for a n	new connection?	Yes No		
If yes, you must provide a C	ustomer Reference Number	(CRN)			
1	, , , , , , , , , , , , , , , , , , , ,	on. Learn more at horizonpower.com.au y phoning 1800 267 926 (residential) or			
Is the request for the CT	meter installation for a le	oad upgrade?	Yes No		
If yes, you must complete a	Supply Upgrade Request fo	orm. Learn more at horizonpower.com.a	u/connections		
Provide the Horizon Power r	eference number (for examp	ole, EKP, WKP, EPP, WPP, GAP, MWP, ES	;P)		
Preliminary ticket number:					
Account number:					



CT meter ratios and types						
<b>CT type:</b> S type - 200/5	T type - 800/5	W type - 1500/5				
Refer to the WA Service and Installation Requirements for more information						
Is a Horizon Power crew required for the proposed works to be completed?						
Yes (during normal working hours - check with local office for working hours) Yes (after hours)						
Additional comments						
Signature of applicant						
If the applicant is a company, please enter the signatories position.						
Name:						
Signature:	_ Date:	Position:				
Submission of this application						
Please email a copy of this application and the single line diagram to metering.services@horizonpower.com.au						
Offices						
West Pilbara						

Stovehill Road	PO Box 817	Ph: (08) 9159 7250
KARRATHA WA 6714	Karratha WA 6714	karratha@horizonpower.com.au
East Pilbara		
18 Anderson Street	PO Box 314	Ph: (08) 9173 8282
PORT HEDLAND WA 6721	Port Hedland WA 6721	porthedland@horizonpower.com.au
East Kimberley		
Cnr of Messmate Way		
and Victoria Hwy	PO Box 916	Ph: (08) 9166 4700
KUNUNURRA WA 6743	Kununurra WA 6743	kununurra@horizonpower.com.au
Gascoyne Mid West		
Cnr Iles Road and		
Robinson Street	PO Box 825	Ph: (08) 9941 6299
CARNARVON WA 6701	Carnarvon WA 6701	carnarvon@horizonpower.com.au
Goldfields Esperance		
143 Sims Street	PO Box 148	Ph: (08) 9072 3400
ESPERANCE WA 6450	Esperance WA 6450	esperance@horizonpower.com.au
West Kimberley		
Nila Janyba Broome Experience Centre		
Shop 25 and 26 Paspaley Plaza, 8 Short Street	PO Box 345	Ph: (08) 9192 9900
BROOME WA 6725	Broome WA 6725	broome@horizonpower.com.au
DICOUNE WA 0125	DIOUTILE WA UIZO	bioome@nonzonpower.com.au

