## **Customer Churn Request Form**



This form is to be used by retailers requesting the churn of a customer from one retailer to another by Power and Water Corporation.

Retailers are required to obtain verifiable consent from the customer and submit with this form. Requests for customer churns are performed in accordance with the Electricity Retail Supply Code, of which timeframes are to be observed.

Retailers are required to complete all information contained within this form and submit with Power and Water's Customer Consent form to the Wholesale Market Services team at  $\underline{\text{frc@powerwater.com.au}}$ 

*Required fields are marked with an asterisk (required).			
Contact details Retailer's Name *			
Name of applicant submitting form *			
Email		Phone	
Customer Information			
Please provide relevant customer inform	nation relating to your data re	equest.	
National Meter Identifier (NMI)	3 ,		
Physical Location Details of the exit poin	nt		
	number Street name		
Suburb Postco	ode Meter Numbers		
Customer Centact Dataile* #			
Customer Contact Details* (for emergency	y/network requirements)		
Account Name*		Contact Name*	
Email		Phone	
Postal Address*			
±Does the Customer operate Life Support  Life Support such as Oxygen, dialysis et  No  * If answered Yes, please list required ec	tc	ess?*	



Churn Details	
Receiving Retailer's Name *	
Reason for churn. Please select one*.	
Standard churn	
Reversal of erroneous churn	
Retailer of Last Resort (RoLR) churn	
Nominated transfer date *	
Churn can only occur on the first day of the month	
Service Order Request number	
For churns requiring an upgrade or installation of new meter	
Estimated annual electricity consumption data of cu	istomer *
kWh	
Data Request Details	
Has a consent form been attached from the custom	er? *
Yes No No	
Comments / Additional Information	
	es and conditions outlined in the Electricity Retail Supply Code and Power and Wa- ees and charges as published on our website. For any further information, please powerwater.com.au.
Please Note: Submission will be not be accepted un	less all required fields are completed.
Full name	
Signature	
	Date
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