

**FORM-III**

**FORM FOR LODGING COMPLAINT FOR DISCONNECTION AND RECONNECTION OF POWER/PROBLEMS IN METERING / DISCREPANCIES IN BILLS**

To be filled in by Consumer

Sub Division : \_\_\_\_\_  
Complaint Ref. No. \_\_\_\_\_  
(to be given by HPSEB)

- Consumer Account No
1. Name & full address of the complainant
2. Brief Description of complaint
3. Date of complaint
4. Any other information

Signature \_\_\_\_\_ of  
Complainant/Consumer

*Tear off (To be perforated)*

.....  
**ACKNOWLEDGEMENT TO BE FILLED IN BY THE HPSEB AND HANDED OVER TO THE CONSUMER**

1. Complaint Ref. No.  Date:   
(to be given by the HPSEB)
2. Applicant's name
3. Received on date
4. Complaint received by
5. Brief detail of complaint
6. Information supplied/provided to consumer, if any
7. Target date to resolve the complaint

Signature of Authorized Officer  
Designation:  
SEAL: