

New energy
connection

Multi unit notice



Post completed forms to: **Synergy New Connections,**
GPO Box K851, Perth WA 6842 or fax to: (08) 6212 1045

By completing this application you are entering an agreement with Synergy to supply your electricity.
For a copy of the full terms and conditions speak to your Synergy consultant or visit **www.synergy.net.au**

*Fields marked with an asterisk are mandatory

STEP 1: Account holder details

Business name (Trusts not applicable)

*ABN/ACN

Director's/owners names

1. *Title Mr Mrs Ms Other

*First name

*Second initial

*Surname

*Date of birth

*Gender Male Female

*Your current home address

Street

Suburb/town

Postcode

2. *Title Mr Mrs Ms Other

*First name

*Second initial

*Surname

*Date of birth

*Gender Male Female

*Your current home address

Street

Suburb/town

Postcode

Please proceed to Step 2



STEP 2: Account holder contact person

*Title Mr Mrs Ms Other

*First name *Second initial

*Surname

*Position Email

Phone Fax Mobile

STEP 3: Account holder postal address

Unit number Street number Lot number

PO Box/Street name

Suburb/town

Postcode

STEP 4: Sign and date

By signing this application you agree to the details enclosed and accept liability for any costs incurred on this account.

I/we give consent for Synergy to release information related to my electricity account to my Builder
(Building Company's Name),
and their agents/representatives, during the course of construction. I/we authorise for Synergy's reference numbers on the table overleaf to be returned directly to my Builder. I/we agree that this involvement of the Builder does not constitute the Builder acting on behalf of me/us or acting as an intermediary between me/us or Synergy for the purposes of the Code of Conduct for the Supply of Electricity to Small Use Customers 2008. I/we further acknowledge that the Builder is not authorised at any time by Synergy to act for, or on behalf of, Synergy.

New business
owner's signature Date / /

If you do not wish to receive marketing information from Synergy please tick this box.

Third party consent

If this form is completed by a third party representative (eg. the builder), please ensure you have attached a copy of your customer's consent showing written authority. You may use Synergy's customer consent form available from www.synergy.net.au/consent. Agents acting without the proper authority to establish this connection will be liable for any costs incurred on this account.

Third party
representative's signature Date / /

Third party
representative's name

(please print)

Relationship to owner

