



APPLICATION FOR NEW ELECTRIC SERVICE CONNECTION

Control Number: _____ Date: _____

I. NEW APPLICATION APPLIED FOR (Please check the box)

☐ Residential ☐ Low Voltage ☐ High Voltage

Membership: [] Sole Proprietorship [] Joint [] Juridical

II. PERSONAL INFORMATION

Name of Applicant: _____
(Last Name) (First Name) (Middle Name) (Suffixes)

Contact Number: _____ Citizenship: _____ Birthdate: _____ Age: _____

Complete Address: _____ Civil Status: _____

(Rm/Flr.Bldg Unit) (House/Lot &Block No,.) (Street/Sitio Name) (Subdivision)

(Barangay) (City/Municipality) (Province) (Zip Code)

Name of Spouse (if any): _____
(Last Name) (First Name) (Middle Name) (Suffixes)

LIST OF DEPENDENTS: (Parents and children; Parents of Spouse)

	Name	Relationship
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____
6.	_____	_____

III. STATUS OF OWNERSHIP :

☐ Owner ☐ Tenant ☐ Caretaker ☐ Corporation ☐ Others, _____

If Tenant/Caretaker please indicate the name of the Owner/Landlord:

Name : _____
(Last Name) (First Name) (Middle Name) (Suffixes)

Contact Number: _____

Number of Years of Residency: _____

Location/ Address to be provided with Electric Service:

(Rm/Flr.Bldg Unit) (House/Lot &Block No,.) (Street/Sitio Name) (Subdivision)

(Barangay) (City/Municipality) (Province) (Zip Code)

IV. SOURCE OF INCOME

☐ Employed ☐ With Business Owned ☐ Corporation Others, _____

IF EMPLOYED:

(Name of Company/ Office Name)

(Company/ Office Address)

Contact Number: _____ Number of Years of Employed: _____

BUSINESS:

(Business Name)

(Business Address)

(Name of Owner)

Please answer the following questions: (Check (/) appropriate blank space for your answer)

_____ YES _____ NO (a) Do you own the house/establishment and/or premises in the above location where electric service is to be provided? (if not, indicate name and address of owner)

_____ YES _____ NO (b) Is the electric installation in your house/establishment complete and ready for connection?

_____ YES _____ NO (c) Are you the first occupant of the house/establishment? (if not, indicate name of previous occupant)

I HEREBY CERTIFY that the above information are true and correct to the best of my knowledge.

Verified by: _____ Applicant: _____
Signature over Printed Name/ Date Signature over Printed Name/ Date

Note: if with representative, state of the name and address of duly authorized representative:

Name : _____
(Last Name) (First Name) (Middle Name) (Suffixes)

Address: _____
(Rm/Flr.Bldg Unit) (House/Lot &Block No,.) (Street/Sitio Name) (Subdivision)

_____ (Barangay) (City/Municipality) (Province) (Zip Code)

Representative: _____
Signature over Printed Name/ Date

APPLICATION APPROVAL CHECKLIST

Kindly put a check in the box if the document is fully accomplish.

<p><input type="checkbox"/> Duly accomplished Application for New Electric Service Connection Form, Notarized Application for Membership Form and Notarized Contract for Electric Service Connection</p> <p><input type="checkbox"/> Barangay Certification and Proof of Ownership (Lot Title/ Deed of Sale/ Deed of Donation/Lease Contract)</p> <p><input type="checkbox"/> Valid ID (Voter's ID, SSS, PRC, etc.) / DTI Certificate/ SEC Registration Certificate</p> <p><input type="checkbox"/> Latest Picture, size: 2 x 2 (2 pcs. for the applicant; 1 pc. for the spouse)</p> <p><input type="checkbox"/> Certificate of Electrical Inspection (CEI) for TEMPORARY / Certificate of Final Electrical Inspection (CFEI) with Electrical as Built Plan</p> <p><input type="checkbox"/> Certificate of Attendance to Pre-Membership Education Seminar (PMES)</p> <p><input type="checkbox"/> Sketch Location and Picture of the Current House/Building</p> <p><input type="checkbox"/> Sketch Location and Picture of the Previously occupied House/Building</p> <p><input type="checkbox"/> Neighbor's Electric Bill</p> <p><input type="checkbox"/> ALECO & APEC Clearance</p> <p><input type="checkbox"/> Accomplished Inspection Report from the Housewiring Inspector</p> <p><input type="checkbox"/> Official Receipt of Bill Deposit & Membership Fee</p>	<p>Other applicable requirements</p> <p><input type="checkbox"/> Marriage Contract for Married Applicant</p> <p><input type="checkbox"/> Endorsement Letter from BAPA</p> <p><input type="checkbox"/> Senior Citizen ID</p> <p><input type="checkbox"/> Authorization from Subdivision Developer</p> <p><input type="checkbox"/> Board Resolution or Secretary's Certificate</p> <p><input type="checkbox"/> Signed Privacy Notice</p> <p><input type="checkbox"/> Other requirements: _____</p> <p>Additional requirements if thru a Representative</p> <p><input type="checkbox"/> Special Power of Attorney (SPA) or Notarized Authorization</p> <p><input type="checkbox"/> Photocopy of valid ID of the representative</p> <p><input type="checkbox"/> Authorized Representative must be nearest kin of the Applicant</p>
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Evaluated by: _____ Validated by: _____

CWDO/Area Consumer Welfare Section Head Area Metering Officer/
Technical Services Department Manager

Recommending Approval: _____ Approved by: _____

HAYSLI I. LUCILO
Institutional Services Department Manager

ENGR. WILFREDO O. BUCSIT
Acting General Manager



PRIVACY NOTICE

We, at the Albay Electric Cooperative Inc. (ALECO), respect your privacy and will keep secure and confidential the Personal Data which you shall provide in our Service Application Form.

We shall collect, use, and store your Personal Data and dispose of it in accordance with our policies and applicable laws, and regulations. We may disclose your Personal Data to authorized subsidiaries, affiliates, service providers, government agencies and third-parties, for the following purposes:

- process your application for service connection;
- inspection of service facilities;
- installation of service meters;
- billing and collection of payments;
- Disconnection, reconnection and technical services, response to

PRIVACY CONSENT:

I have read and understood ALECO's Privacy Policy. By filling out this form and submitting the documents required for my service application, I give my full consent to ALECO for the collection, use, processing, disclosure and retention of my Personal Data. With regard to personal information about someone other than myself, I confirm and acknowledge that I have obtained their consent for disclosure of their personal information to ALECO.

- ☐ I Consent
☐ I do not Consent

Signature over Printed Name/Date