

MALINDI WATER & SEWERAGE CO. LTD.

(MAWASCO)

RECONNECTION REQUEST AND RECONNECTION INSTRUCTION

1 Reconnection Request:

Neconnection Request.				
Terms: I, the undersigned am the (representative) account holder of the below mentioned water account and hereby request the water supply for the said account to be reconnected after paying the amounts due set out under item 2 hereof and subject to authorisation.				
Account holder's name:		Account number		
Name of authorised person if different	Signature:		Date:	
2 Payments:				
Description Amount due	e Amount	paid Doc. no	o. Ref.	Doc Date
Outstanding Bal*				
Additional Deposit				
Reconnection Fee				
Other				
TOTAL				
(*) Part payment agreements must be duly authorised and attached.				
Raised charges (sign & date)	Checked receipts (s	Checked receipts (sign & date)		
• • • •				
Authorisation: Authorising Officer (Name) Authorising Officer (Signature & Date)				
Authorising Officer (Name)		Authorising Officer (Signature & Date)	
Comments:				
_				
4 Reconnection				
Reconnection No.:	Reconnecting Office	er.:	Reconnection date:	Time:
Meter Number:		Meter Reading at Turn On:		
Connection size:		Meter size::		
Comments (e.g. meter relocated):				