



NEGROS POWER
NEGROS ELECTRIC AND POWER CORP.

AMENDMENT FORM

PRINT ALL INFORMATION IN CAPITAL LETTERS. IF THE INFORMATION NOT APPLICABLE WRITE 'N/A'.

ACCOUNT INFORMATION

ACCOUNT NO. _____ RATE CLASS Res Comm Pow Gov Int

ACCOUNT NAME: _____

A. CORRECTION/CHANGE/ADDITIONAL NAME

Change of Name Correction of Name Additional Name

*Residential Rate Class

Primary Owner

LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

Co-Owner

LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

*Other Rate Class Commercial Power Industrial Government

ACCOUNT NAME

B. UPDATE/ADDITIONAL CONTACT INFORMATION

Update Contact Information Additional Contact Information

Mobile Number 1	Mobile Number 2
Email Address 1	Email Address 2
Home Phone Number 1	Home Phone Number 2

C. BILL DELIVERY OPTION

- Spot Billing
- Send to Email
- SOA (for commercial)

D. CORRECTION OF ADDRESS

Primary Address (Unit/House No., Street Name, Barangay/Subdivision, District)

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Primary Adrees (Unit/House No., Street Name, Barangay/Subdivision, District)

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E. CHANGE OF RATE CLASS/DOWNRATING/UPRATING

	FROM	TO
<input type="checkbox"/> RATE CLASS	_____	_____
<input type="checkbox"/> UPRATING	_____	_____
<input type="checkbox"/> DOWNRATING	_____	_____
<input type="checkbox"/> OTHERS	_____	_____

Upon application for change in my account information, I hereby agree that:

1. Any alteration in the electrical installation including illegal connection found after the approval of my application for the change/s of my account information will be my responsibility and that the corresponding penalty, if any, will be on my account.

2. Should conflict arise, change of my account information may be held pending or cancelled if already approved.

This includes but is not limited to:

a. Protest, conflicting claims of ownership or any legal issue that may be raised involving the subject account, until and unless finally resolved by the court, appropriate agency or settled amicably.

b. Proven irregularities in the application and documents submitted;

c. Other analogous circumstances.

Customer's Signature Over Printed Name

Customer's Signature Over Printed Name

This is to acknowledge receipt of the required documents and after thorough evaluation, said documents are found to be in order; therefore the application is recommended for approval.

Processed / Evaluated By:

Customer Welfare Desk Officer/Associate
Community Relations Officer/Associate
Key Account Officer/Associate

Reviewed By:

Customer Service Manager

Approved By:
