

EPDCL Name Change Application Form

Name Changes Request Details:-

Service Connection Number*: _____

Circle Name*: Eluru ☐ Rajahmundry ☐ Srikakulam ☐ Visakhapatnam ☐ Vizianagaram

Area Code*: _____ Section Name*: _____

Consumer Details:-

Consumer Details	Actual Details	Changed Details
Surname		
Name		
Father Name		
Caste		
Mobile Number		

Service Type: _____ Reason for Name Change: _____

Location of Premises:-

House No*: _____ Street*: _____

Circle*: Eluru ☐ Rajahmundry ☐ Srikakulam ☐ Visakhapatnam ☐ Vizianagaram

Division*: _____ Sub Division*: _____ Pin Code: _____

Location Type*: ☐ Urban ☐ Rural Location Name*: _____

Load Connected: _____ Dispatch No: _____

Informant Details:-

Aadhar Number: _____ Informant Name*: _____

Relation*: _____ Door No: _____ Locality/Land Mark: _____

State*: _____ District*: _____ Mandal*: _____

Village/Ward*: _____ Pin Code: _____ Mobile Number*: _____

Phone: _____

Email: _____

Delivery Type*: ☐ Manual

Security Deposit (Available) *: _____ Proof Document*: ☐ Gift Deed ☐ Sale Deed ☐ Indemnity Bond

ID Proof*: ☐ Aadhar Card Copy ☐ Electoral Copy ☐ Pan Card copy ☐ Ration card copy

Document List: - (NOTE: All Upload Documents are in PDF Format Only)

☐ Application Form*

☐ ID Proof*

☐ Caste Certificate (Mandatory if SC/ST) *

☐ Owner Ship Certificate/Sale Deed/Gift Deed (Selected Proof Document) *

☐ Municipality/Gram panchayat Permission Letter*

☐ Indemnity Bond*

☐ Transfer Transferee Document*

☐ Latest Bill and Receipt*

Applicant's Signature