

Audit required (Please tick)	Electricity <input type="checkbox"/>	Gas <input type="checkbox"/>	Water <input type="checkbox"/>
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Please return this completed form with: i) the completed Letter of Authority (on company letter headed paper; ii) the Engagement Letter; iii) a COMPLETE recent copy of each bill for electricity & gas; iv) a years worth of water and sewerage bills.

Contact Details

Full name: _____	Position: _____
Tel: _____	Mobile: _____
Email: _____	

Business Details

Business type: Ltd PLC LLP Sole Trader Partnership Charity

Business/company name: _____ Business sector: _____

VAT registration number: _____ Co/charity number: _____

Business/company address: _____

 _____ Postcode: _____

Time at this address: _____ yrs _____ mths Operating hours: _____

Is the building: Owned Rented Business bank: _____

Approximate business turnover: £ _____ Number of equivalent full time employees: _____

Meter Information

Electricity Meter (1)

What is the meter serial number? (the long number that is written clearly on the meter): _____

What proportion of the energy consumption do you estimate to be residential usage from this meter? %

Electricity Meter (2)

What is the meter serial number? (the long number that is written clearly on the meter): _____

What proportion of the energy consumption do you estimate to be residential usage from this meter? %

Gas Meter (1)

What is the meter serial number? (the long number that is written clearly on the meter): _____

What proportion of the energy consumption do you estimate to be residential usage from this meter? %

Gas Meter (2)

What is the meter serial number? (the long number that is written clearly on the meter): _____

What proportion of the energy consumption do you estimate to be residential usage from this meter? %

Additional Information

Have you included a photograph of your meter? Yes No

Do you have company Letter Headed Paper? Yes No

If you don't have Letter headed paper, do you give us permission to create one for the LOA? Yes No

Please provide any further information that you feel may be relevant _____

Signature

Signed: _____ Full Name: _____ Position: _____

Date: _____

Office: CN _____ IN _____