

**Perth Energy Electricity & Gas Supply
REQUEST FOR QUOTATION FORM**



PLEASE COMPLETE SECTION 1 CONTACT DETAILS
SECTION 2 FOR ELECTRICITY QUOTATION
SECTION 3 FOR GAS QUOTATION

SECTION 1 - CUSTOMER DETAILS (Please complete in full in BLOCK CAPITALS):

*Company Name:	ACN/ABN:
*Contact Name:	*Position:
*Phone	*Email:
Current Retailer:	Spend per month (approx.): \$
Contract End Date (approx.):	*Business Type:

SECTION 2 – ELECTRICITY QUOTATION

NMI	METER NUMBER	TARIFF	SUPPLY ADDRESS (AS SHOWN ON YOUR ELECTRICITY BILL)

DO YOU CURRENTLY HAVE SOLAR PV INSTALLED? IF YES	PLAN ON INSTALLING SOLAR PV IN THE FUTURE? IF YES
Array Size (kW):	Array Size (kW):
Inverter Size (kVA):	Inverter Size (kVA):
Install Date:	Install Date:
Installation Company:	

SECTION 3 - GAS QUOTATION

Current Retailer:	Spend per month(approx.): \$
Contract End Date (approx.):	

MIRN (REQUIRED)	METER NUMBER (REQUIRED)	SUPPLY ADDRESS (AS SHOWN ON YOUR GAS BILL)

CUSTOMER COMMENTS:

Perth Energy requires permission from an authorised representative in order to obtain the gas and electricity consumption, profile and Contract Maximum Demand (CMD) if applicable from ATCO or Western Power. By signing below, you are granting Perth Energy permission to obtain this information.

PLEASE NOTE: This is NOT an application to supply energy to the business and there is no obligation or cost to receive a quote.

SIGN:

NAME (PLEASE PRINT)

POSITION: DATE:

FOR OFFICE USE ONLY:
PE MSO REF: Date Submitted: Name: