Eill Sonoro	to form for coal			nplaint Form	ainad anly i	Form – III	
Fill Separate form for each Complaint. The complaint will be entertained only if checklist is filled. The Electricity Ombudsman, Jharkhand 4 th floor, Bhagirathi Complex, Karamtoli Road, Ranchi – 834001 Ph. : 0651-2360117							
To be filled by Ombudsman Office DD-MM							
Complaint II Appeal/Case N	D/ No.	Date of Receiving Complaint/ Appeal/Petition					
To be filled by the Appellant/Complainant/Petitioner							
Name of Con Appellant/Com	umer/ lainant		Consumer No. *				
rippenant comp			Consumer Category				
Address				Phone No.			
			Fax No.				
City/Village				E-mail			
District				PIN			
Licensee		Circle			Division		
Complaint Type (Please tick)							
1. Billing Dispute 6. Voltage Complaints							
2. Non Supply of Power 7. Problems in Metering							
3. Safety 8. Complaint regarding billing and collections service							
4. Complaint regarding getting fresh connections 9. Complaint regarding Disconnec- -ction and Reconnection							
5. Interruption/failure of power supply 10. Others							
If others, pleas							
Give Brief Des Forum	scription of com	plaint (Details may	y be a	nnexed separately)	. Attach cop	by of complaint sent to	
Relief sought from Ombudsman (Details may be annexed separately)							

Name of forum	Address					
Ref No. of Letter/order received From Forum and Date	Date					
*Write 'NEW' if No consumer No. Allotted.						
Decision/order of the forum in brief (Details ma Relief Remedy offered by Forum.	y be annexed separately). Attach copy of					
List of Enclosures:						
1. Copy of Complaint to Forum.						
2. Copy of Reply/Order received from I	Forum.					
3. Affidavit (As per Form – V).						
Check List: Before filing complaint with Forum, p met and all boxes are checked ().	lease ensure that all of the following criteria are					
1. Has lodged complaint with the Forum.						
2. The representation has been made within 1 month from the date of the order of the Forum.						
3. Complaint does not lie with any Consumer Forum or any Court, or the Commission.						
4. Have provided complete personal information like name, address, consumer account no. etc.						
5. Have mentioned the Relief sought from	Ombudsman.					
Verific	cation					
I(name	e in full and in block letters), Son/Daughter/Wife					
resident of						
Districtsolemnly declare that to						
information given in this complaint and the annex						
complete and truly stated and in accordance we establishment of Forum for Redressal of Grieve	*					

Ombudsman regulation 2004"

Signature:

Date:

Place:

Name: