



**MAXIMUM DEMAND DECLARATION FOR CONNECTED LOAD CHARGE
(CHANGE OF TENANCY)**

For Office Use :
CA No.: _____
SR No.: _____

Contract Account Details

Name of Applicant : _____
(The Consumer)

Authorised Person : _____
(Authorised person for the application of electricity supply)

Address of Premises : _____

MAXIMUM DEMAND DECLARATION FOR CONNECTED LOAD CHARGE (CLC)

Customer has to declare Maximum Demand (MD) in staggered (if any) for the balance of CLC period once upon Change of Tenancy application to determine the Reference MD for CLC. While, existing final declared MD (based on Connection Charge paid by the previous customer) will be used to determine the reference MD CLC for the last 2 years of CLC.

MAXIMUM DEMAND (MD) DETAILS

Maximum Demand Declared : _____ kW

Connected Load Charge Table:

Year	Existing MD Declared, kW	New MD Declared, kW	Reference MD for CLC* kW
Staggered MD			85% x [Declared Staggered MD or Highest Recorded MD, whichever is higher]
Staggered MD			
Staggered MD			
Staggered MD			
Final MD			75% x [Declared Final MD or Highest Recorded MD, whichever is higher]
Final MD			

*Minimum MD to be achieved to avoid CLC penalty

APPLICANT'S DECLARATION

I / We hereby acknowledge that all information given are true and agree with the CLC terms as below:

- CLC is applicable when the actual MD recorded on any month is less than Reference MD. CLC rate of RM8.50/kW will be charged for every kW shortfall between the MD recorded compared to the Reference MD and subjected to prevailing changes from time to time
- If actual recorded MD is higher than declared MD (Highest Recorded MD, HMD), the HMD will replace the declared MD for the year and following year (compared with the MD declared, whichever higher). Reference MD will be revised using the new declared starting from the next billing cycle.
- Any request to redeclare lower MD either staggered MD or final MD after supply connected, consumer will be subjected to an additional charges as per current policy.

Applicant's Signature / Company Stamp
(whichever applicable)

Name of Applicant : _____
(Signing for the company)

Date : _____

Designation : _____

Mobile No: _____

MyKad No: _____
