

Connection Application - Large, Multiple and Remote Connections



FORM NECF-03

Who should use this form

Use this form if you:

- require a new or altered service connection greater than 100 Amps **OR**
- require new infrastructure to provide electricity to a subdivision of land **OR**
- require a new or altered connection at high voltage **OR**
- require a new or altered service connection at 100 Amps **WHERE**
 - the development comprises more than 6 separate units **OR**
 - any item of plant or equipment is rated at 30 amps or more

For other connections use NECF-02 Connection Application - Residential and Small Commercial Connection

General enquiries

More information on completing this form can be found on our website:

www.ausgrid.com.au/connectingtothenetwork

Fields marked with an * are mandatory.

This form is to be completed using **BLOCK LETTERS** only

Any application marked TBA or TBD will be incomplete and will be returned with advice that Ausgrid will not be able to process the application until a complete application is re-submitted. If you do not have all the required information at this stage and are only interested in determining how your proposed development will be supplied, you should consider lodging a preliminary connection enquiry, using our form NECF-01.

How to submit this form to Ausgrid

Sydney, Central Coast and Hunter

Fax: (02) 4399 8007

Fax (local call): 1300 662 089

Email to: datanorth@ausgrid.com.au

Upper Hunter only

Fax: (02) 6542 9037

Email to: datamuswellbrook@ausgrid.com.au

Total number of pages sent*

PART A: PREMISES AND DEVELOPMENT DETAILS

1. Premises and Owner Details

Retailer		NMI		Your NMI can be found on your electricity bill. Put NA for a new site.	
<input type="text"/>					
Property Name					
<input type="text"/>					
Floor No.	Unit No.	Street No. or RMB*	Lot No.*	DP No.*	
<input type="text"/>	<input type="text"/>	<input type="text"/>	or <input type="text"/>	<input type="text"/>	
Street Name*					Post Code*
<input type="text"/>					<input type="text"/>
Suburb*		Nearest Cross Street			
<input type="text"/>		<input type="text"/>			
Name of Registered Proprietor of Land*					This is the person authorising connection of the premises.
<input type="text"/>					
Address of Registered Proprietor of Land*					Post Code*
<input type="text"/>					<input type="text"/>

2. Retail Customer or Real Estate Developer Details

Tick here if you are the land owner Now proceed to Section 3

Title, First Name, Last Name*	ABN (if applicable)
<input type="text"/>	<input type="text"/>
Company Name (if applicable and provide representative details above)	Phone No.
<input type="text"/>	<input type="text"/>
Postal Address *	Mobile Phone No.
<input type="text"/>	<input type="text"/>
Email Address*	Fax No.
<input type="text"/>	<input type="text"/>

3. About You - The Connection Applicant

Questions in this section are about the person making this Connection Application.

What type of applicant are you?* **A = Retail Customer,** **D = You are applying on behalf of a retail customer or developer**
 (write A, B, C, D,E or F) **B = Real Estate Developer** **E = Electrical Contractor on behalf of a customer or developer**
 C = Energy Retailer **F = ASP on behalf of a customer or developer**

Title, First Name, Last Name*	ABN (if applicable)		
<input type="text"/>	<input type="text"/>		
Company Name (if applicable and provide representative details above)	Phone No. * (and/or)		
<input type="text"/>	<input type="text"/>		
Postal Address *	Mobile Phone No.*		
<input type="text"/>	<input type="text"/>		
Email address*	Fax No.		
<input type="text"/>	<input type="text"/>		
Electrical Contractor Licence No.* (If E above)	ASP No.* (If F Above)	Level	If you are an ASP you must provide your accreditation number and level (1,2,3)
<input type="text"/>	<input type="text"/>	<input type="text"/>	

Street Address of the Premises (to be completed by applicant) *

Post Code*

4. Electrical Contractor Details (if available)

Tick here if the same as Section 3 above_ Now proceed to Section 5

Title First Name and Last Name (or Company Name) ABN (if applicable)
Postal Address Phone No.
Email Fax No.
Electrical Contractor Licence No.

PART B: LOAD DETAILS

5. Connection Details

(i) Connection Timeframes

(a) When do you expect the construction of the premises connection assets to commence?*
(b) When do you wish to energise (ie turn on the supply to) the premises?*

Premises connection assets are the components of the distribution system used to provide the connection service to the premises eg service cable, metering, new Ausgrid pole, pillar or substation etc.

(ii) Existing Connection (if applicable)

Existing Point of Common Coupling Pole Pillar Substation Asset No. Meter No.
If you have an existing supply, is it from a substation located on the premises?*

(iii) Infrastructure to a Land Subdivision

(a) Is this an application to provide infrastructure to a land subdivision, eg provide low voltage reticulation within an URD subdivision?
(b) No. of lots in the subdivision*
(c) Nearest existing Ausgrid Asset* Pole Pillar Substation Asset No.
Proceed to (vi)

(iv) Proposed Point of Common Coupling* (Please tick one)

Pole Pillar Substation Asset No.
Is the Point of Common Coupling within 50m of the boundary of your land?*

(v) Proposed Point of Supply* (Please tick one or if Other, please describe)

Private Pole / Pit / Pillar Main Switchboard Front of Premises Other

(vi) Connection Type* (Please tick all that apply)

New Upgrade Alteration Separation Amalgamation

(vii) Embedded Generation Details* (e.g. solar, wind, hydro, back-up and standby)

(a) Does the premises have existing embedded generation?
(b) Are you upgrading or installing new embedded generation?
(c) Your Installer's Clean Energy Council Accreditation No.

Street Address of the Premises <i>(to be completed by applicant)</i> *	Post Code*
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(viii) Service Type* (Please tick one)

Overhead Underground UGOH Off Pole Transformer Busbar Supply

(ix) Service Size* (Please tick one)

100 Amps 200 Amps 400 Amps 630 Amps 800 Amps 1000 Amps

1200 Amps 1600 Amps 2000 Amps 2500 Amps 3000 Amps

Other Describe _____
(Complete if Other is ticked, eg high voltage connection at 11KV)

(x) Number of Phases* (Please tick one)

1 Phase 2 Phases 3 Phases

(xi) Metering Details*

(a) Are new meters being installed as part of this connection application?* Y N ▶ If yes, number of meters in (b) below must be completed

Tariff

(b) Number of Meters: (enter total number)

Single Phase (E1) <input type="checkbox"/>	Three Phase (E3) <input type="checkbox"/>	Single Phase & Controlled Load (E2) <input type="checkbox"/>	Controlled Load 1 <input type="checkbox"/>
			Controlled Load 2 <input type="checkbox"/>

(c) Embedded generation metering: (tick if applicable or describe)

Net Gross Other _____

(d) Will your installation be CT metered?* Y N ▶ If yes, CT Metering Form must be submitted. Refer to that form for submission details

(xii) Type and Number of Premises	Land Title Type* <small>(Please tick one)</small>	Premises Usage* <small>(Please tick one or more)</small>	No. of Premises* <small>(enter total number)</small>	Which of the following applies to your premises?* <small>(one must be ticked)</small>
	Torrens <input type="checkbox"/>	Residential <input type="checkbox"/>	<input type="text"/>	Urban <input type="checkbox"/> Unknown <input type="checkbox"/>
	Strata <input type="checkbox"/>	Commercial / Industrial <input type="checkbox"/>	<input type="text"/>	Rural <input type="checkbox"/>
	Community Title <input type="checkbox"/>	House Services <input type="checkbox"/>	<input type="text"/>	◀ Only fill out House Services if you have Multiple Installations
		Builder's Service <input type="checkbox"/>	<input type="text"/>	

(xiii) Calculated Maximum Demand in Each Phase (Amps) ◀ This question is not asking about service rating.

	A	B	C		
(a) Existing Maximum Demand	<input type="text"/>	<input type="text"/>	<input type="text"/>	Amps	Existing Service Length <input type="text"/> m
(b) Proposed Maximum Demand * <small>(Total of New & Existing Load)</small>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Amps	Proposed Service Length* <input type="text"/> m

(c) Is a Maximum Demand Calculation worksheet attached to this application?* Y N ◀ A worksheet showing the maximum demand calculation in accordance with AS/NZS3000 must be attached to this form unless you answered "Y" in (iii)(a) above.

6. Additional Development Details (please fill in where relevant to your premises)











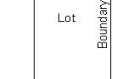
If your development involves any of these, this section MUST be completed, even if you are providing your plans with this application

<p>Residential Portion</p> <p>Number of living units <input type="text"/></p> <p>Number of bedrooms per unit <input type="text"/></p> <p>Gas hot water (yes/no) Y <input type="checkbox"/> N <input type="checkbox"/></p> <p>Gas cooktop (yes/no) Y <input type="checkbox"/> N <input type="checkbox"/></p> <p>Car park ventilation current rating <input type="text"/> Amps</p> <p>Car park area requiring lighting <input type="text"/> m²</p> <p>Air conditioning (yes/no & if Yes, No. of units) Y <input type="checkbox"/> N <input type="checkbox"/> <input type="text"/></p> <p>Air conditioning rating (Electrical Input) <input type="text"/> Amps</p> <p>Industrial Portion</p> <p>No of factory units <input type="text"/></p> <p>Total floor area of all factory units <input type="text"/> m²</p>	<p>Commercial Portion</p> <p>Number of shops <input type="text"/></p> <p>Total floor area with air conditioning <input type="text"/> m²</p> <p>Total office area without air conditioning <input type="text"/> m²</p> <p>Car park ventilation current rating <input type="text"/> Amps</p> <p>Car park area requiring lighting <input type="text"/> m²</p> <p>Warehouse floor area <input type="text"/> m²</p> <p>Commercial areas for food handling (yes/no) Y <input type="checkbox"/> N <input type="checkbox"/></p> <p>Other (eg Lifts, Cranes, etc - List Type, No & Rating in Amps)</p> <p>_____</p> <p>_____</p>
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7. Location Diagram*

This section is about the physical location of your premises and an electrical schematic will not be accepted. Ensure that your diagram clearly identifies property, nearest cross street, North Point, Proposed Point of Common Coupling, Point of Supply and service cable route to main switchboard. Attach a separate paper if more space is required.

Use the following symbols where necessary:

-  North Point
 -  Ground Substation
 -  Pole Top Substation
 -  Ausgrid Pole (indicate No if available)
 -  Ausgrid Pillar (indicate No if available)
 -  Ausgrid Pillar Standard (indicate No if available)
 -  Customer Pillar (Existing or proposed)
 -  Customer Pole (Existing or proposed)
 -  Building
-  Road Boundary
 Lot Boundary

8. Specific Equipment - Non Linear/Fluctuating Load Details (complete if installing any of the items listed below)

This section is for connections where (a) any single item of plant or equipment has a rating > 75 Amps at 230/400V, (b) any HV connections, or (c) Work where the proposed equipment may cause excessive fluctuations of voltage (eg. lifts, welders, pumps, x-ray machines).

Description	kVA/kW	Amp	No of Ops/Hr	Design Standard	Mitigation Measures
Distorting Loads					
1 Phase capacitor-filtered or conventional rectifier					
3 Phase 6-pulse capacitor filtered rectifier / VSD					
3 Phase 6 pulse capacitor filtered rectifier with series inductor > 3% or DC drive / VSD					
3 Phase 6 pulse inductor filtered rectifier / VSD					
3 Phase 12 pulse rectifier / VSD					
AC voltage regulator					
Variable voltage variable frequency (VVVF) drive					
Switch mode power supplies					
Power Factor Correction					
Other (please specify)					
Fluctuating Loads					
Rating of the largest motor					
Rating of the second largest motor					
Rating of other frequently fluctuating loads:					
Other:					
Special Equipment					
X-Ray or Magnetic Resonance Imaging Devices					
Welding plant rating					
Arc furnaces rating					
Unbalanced loads (e.g PH-N / PH-PH loads)					
Other, (incl >75A rated equipment):					
TOTAL APPARENT POWER RATING (KVA)					

9. Expedited Connection (optional)

For information regarding this section please refer to our website or the guide for this form.

Are you applying for an expedited connection? Y [] N [] ▶ If No, proceed to Section 10

If Yes, then indicate which model standing offer to provide connection services is acceptable to you (you may tick more than one).

- Basic - 100 Amps connection
Basic - Over 100 Amps connection
Basic - micro EG connection
Standard - connection requiring Ausgrid-funded offsite works
Standard - connection requiring Ausgrid-funded onsite substation
Standard - ASP/1 connection
Standard - connection requiring Ausgrid augmentation (substation upgrade)

10. Other Information

Information you provide in this section may help Ausgrid to process your connection application faster.

Was a Preliminary Connection Enquiry lodged for the premises using our form NECF-01? Y [] N [] Preliminary Enquiry No.

Has Ausgrid provided a certified design number for a Network Augmentation project associated with the premises? Y [] N [] Certified Design No.

If you have appointed an ASP/1, please provide their details below otherwise skip to next question

ASP/1 Name ASP No.

Do you have development consent for your proposal? Y [] N [] DA Reference No.

If yes, please attach any conditions relating to electricity where not already provided to Ausgrid.

Do you wish to underground/relocate electricity assets in conjunction with this connection application? Y [] N [] ▶ If yes, please provide details in section 11, or on a separate paper

11. Comments and Additional Information (if applicable)

(e.g. References to similar existing installations, supporting information. Attach information on a separate paper if there is insufficient space below)

Multiple horizontal lines for providing comments and additional information.

12. Signatory

Signatory should be the person named in Section 3, ie the *Connection Applicant*.

Where this application requests an expedited connection, I declare that I have read and understood the terms and conditions of the connection offer referred to in section 9 (including the Connection Offer Summary) and agree that if the connection is expedited that a contract based on that offer will be formed with Ausgrid on the date that Ausgrid receives the application.

Where this application is being made on behalf of a retail customer or real estate developer, I declare that I have obtained the authority of that person to make this application of their behalf, including where applicable, making a request for expedition of the connection application.

Signatory Name*

Signatory Position*

Signature of Connection Applicant*

Date signed by the Connection Applicant*

____ / ____ / ____

Attachment Checklist:

Tick if done

No of pages

Remarks

This Connection Application form	<input checked="" type="checkbox"/>	6	Ensure all fields marked with * are filled in
AS/NZS3000 maximum demand worksheet	<input type="checkbox"/>		Refer to question 5(xiii)(c)
Connection Application for Embedded & Standby Generation Form NECF-04	<input type="checkbox"/>		Required if you answered "Y" in question 5(vii)(b)
Development Plans	<input type="checkbox"/>		Attach if available
Location Diagram (if space in Section 7 is inadequate)	<input type="checkbox"/>		
Conditions of consent to your Development Application	<input type="checkbox"/>		Refer to Section 10
Other (please specify) _____	<input type="checkbox"/>		
Other (please specify) _____	<input type="checkbox"/>		
TOTAL*			

If this application is incomplete in a material respect or if Ausgrid requires more information, Ausgrid will not process the application until you provide the relevant information. If you do not supply the requested information within 12 months, this application will lapse.