

6/2005

**Forum for Redressal of Consumer Grievances.**

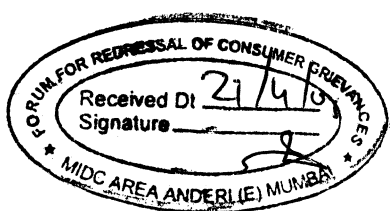
- 1. Name of the Applicant: - : MUZAMMIL S. QURESHI  
(IN BLOCK LETTERS)
- 2. Consumer No./Application No. : A 25152011
- 3. Division/Zone : \_\_\_\_\_
- 4. Nature of Complaint  
(Excess billing, Supplementary bills,  
Tariff change Vigilance charges) : EXCESS BILLING
- 5. Complaint No. & Date. : \_\_\_\_\_
- 6. Disputed Amount. : 1,29,810.00
- 7. Is the Amount charged U/s  
126 of Electricity Act.(i.e for  
unauthorized use of Electricity  
Or Theft of Electricity.) : NOT Applicable
- 8. Date of registering of Complaint  
with REL and with Name &  
Designation of the concerned  
Officer: : \_\_\_\_\_
- 9. Action taken up by REL in  
mitigating the Grievance : DISPUTE PAYMENT AS PER BANDALE  
INSTALMENT TO BE DECIDED.  
ALLOWED TO PAY 15,000  
AND NEW METER INSTALL  
ON 14/03/05.
- 10. Name & Designation of the  
Officers contacted give details  
of the discussion and Orders issued: : ACTION TAKEN BY  
A. P. BANDALE  
WITHOUT GIVING ANY  
NOTICE AND METER WAS  
REMOVED AND DISCONNECTED.

11. Any other matter you like to state regarding grievances redressal by REL.

DISPUTE MATTER OF THE PAYMENT WAS IN  
CONCERNED WITH MUZAMMIL S. QURESHI WHOSE  
CONSUMER NO IS A25152011 METER NO LF2 1917160  
THE METER WHICH WAS REMOVED ~~AND~~ LF2 1954244 FROM THE  
SITE WITHOUT GIVING ANY NOTICE WAS IN THE NAME  
OF MUTTALIB . S. QURESHI WHOSE CONSUMER NO IS A25157062

Signature of Applicant.

*Muzesh*



**Schedule A**  
**APPLICATION FOR REDRESSAL OF GRIEVANCE**

Date 21/04/05

1. NAME OF THE CONSUMER MUZAMMIL S. QURESHI
2. FULL ADDRESS OF THE CONSUMER NEW BASTI OPP MUTTON SHOP  
PIN CODE MUMBAI 60 JANTA COLONY ROAD  
Jogeshwan EAST  
PHONE NO./FAX NO. 9821590913 - 9322896295
3. PARTICULARS OF CONNECTION AND CONSUMER NO. A 25152011  
(Please state nature of connection) LF2

4. DETAILS OF THE GRIEVANCE

(If space is not sufficient Please enclose separate sheet)

EXCESS SUPPLEMENTARY BILLING

5. (a) DATE OF ORIGINAL INTIMATION OF GRIEVANCE BY THE CONSUMER TO THE DISTRIBUTION LICENSEE

6. REMEDY PROVIDED BY THE DISTRIBUTION LICENSEE, IF ANY

(If remedy has been provided, please enclose relevant communication from the Distribution Licensee)

ALLOWED TO PAY Rs. 15,000 AND A NEW METER  
WAS INSTALLED.

7. NATURE OF RELIEF SOUGHT FROM THE FORUM

JUSTIFY EXCESS SUPPLEMENTARY OF BILLING  
(Please enclose any proof to support claim, if any)

8. LIST OF DOCUMENTS ENCLOSED

(Please enclose copies of any relevant documents)

9. DECLARATION

- (a) I/ We, the Consumer /s herein declare that:

(i) the information furnished herein above is true and correct; and

(ii) I/ We have not concealed or misrepresented any fact stated in aforesaid columns and the documents submitted herewith.

- (b) The present Grievance has been intimated to the Distribution Licensee in the form and manner and within the time frame prescribed by the Distribution Licensee and I/ We are not satisfied by the remedy provided by the Distribution Licensee or no

remedy was provided within a period of two (2) months from the date of original intimation.

- (c) The subject matter of the present Grievance has never been submitted to the Forum by me/ or by any one of us or by any of the parties concerned with the subject matter to the best of my/ our knowledge.
- (d) The subject matter of my / our Grievance has not been settled through the Forum in any previous proceedings.
- (e) The subject matter of my / our Grievance has not been decided by any authority/court/arbitrator.

OR

The subject matter of my / our Grievance is pending since (please mention the date when the matter was filed) ..... before ..... (\*Please mention the name of the authority/court/arbitrator before whom the Grievance is pending) and the proceedings are likely to take time for being finally adjudicated

Yours faithfully

(Signature)

(Consumer's name in block letter)

MUZAMMIL S. QURESHI

**NOMINATION** (If the Consumer wants to nominate his representative to appear and make submissions on his behalf before the Forum, the following declaration should be submitted.)

I/We the above named Consumer hereby nominate Shri/Smt. MUTTAHIB S. QURESHI who is not an Advocate and whose address is .....

..... as my/our REPRESENTATIVE in the proceedings and confirm that any statement, acceptance or rejection made by him/her shall be binding on me/us. He/She has signed below in my presence.

ACCEPTED

(Signature of Representative)

(Signature of Consumer)

MUTTAHIB QURESHI  
Muttahib

FEROZ QURESHI