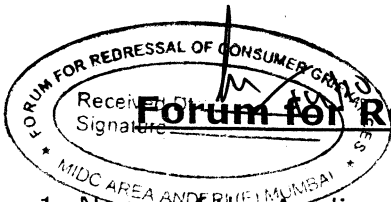


42/2005



Forum for Redressal of Consumer Grievances.

1. Name of the Applicant: - : VIREN NATWARLAL SONI
(IN BLOCK LETTERS)
2. Consumer No./Application No. : K-11290029
3. Division/Zone : NORTH ZONE
4. Nature of Complaint : Tariff change Vigilance
(Excess billing, Supplementary bills, ~~Illegal~~ Charges.
Tariff change Vigilance charges)
5. Complaint No. & Date. : _____
6. Disputed Amount. : Rs.22,121.00
7. Is the Amount charged U/s : Yes
126 of Electricity Act.(i.e for
unauthorized use of Electricity
Or Theft of Electricity.)
8. Date of registering of Complaint : --
with REL and with Name &
Designation of the concerned
Officer:
9. Action taken up by REL in : NIL
mitigating the Grievance
10. Name & Designation of the : _____
Officers contacted give details : _____
of the discussion and Orders issued: : _____
: _____

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

REL passed Final Assessment Order for the period
1/10/2003 to 31/3/2005 i.e. for 18 months of Difference
of LF1 & LF2 instead of 180 days as per the M.E.R.C.
Rules.

CAZINA NARANGIA SONI
Signature of Applicant.

Schedule A
APPLICATION FOR REDRESSAL OF GRIEVANCE

Date 30/09/2005

1. NAME OF THE CONSUMER VIREN NATWARLAL SONI
2. FULL ADDRESS OF THE CONSUMER Room No.2-B/47, Jawala Estate,
S.V. Road, Borivali (W), Mumbai 92.
PIN CODE 400 092

PHONE NO. / FAX NO. _____
3. PARTICULARS OF CONNECTION AND CONSUMER NO. LF2 Connection
(Please state nature of connection) Con. No. K-11290029
4. DETAILS OF THE GRIEVANCE
(If space is not sufficient Please enclose separate sheet)
REL Passed Final Assessment Order for 18 months of
Difference of LF1 & LF2 for the period 1/10/2003 to
31/3/2005 instead of 180 days as per the M.R.C.
Rules.
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)
7. NATURE OF RELIEF SOUGHT FROM THE FORUM
Revise the Assessment Order.
(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 contents 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

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

एरिण नरुगि रीण.

(Signature)

(VIREN NATWARLAL SONI)

(Consumer's name in block letter)

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/Sux Mahesh Barbhaya**, who is not an Advocate and whose address is **Lata Enterprises, Shop No. 5, Sagardeep Darsh, S.V. Road, Borivali (W), Mumbai-92.**

..... 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

Mahesh M. Barbhaya
(Signature of Representative)

(Mahesh Barbhaya)

एरिण नरुगि रीण.

(Signature of Consumer)

(VIREN NATWARLAL SONI)