**Filing of Grievances before the Forum**

1. **The Name of the individual or Organization -**
2. Account No./ Sanctioned Load/ Category **-**
3. Complete postal address **–**
4. **Name & Phone/Mobile No. of contact person (authorized person) of the Company/Firm or Complainant:**

Name –

Phone/Mobile No –

E-mail

1. Name & Phone/Mobile No. of Petitioner's Counsel/ Representative (if engaged**)**

Name –

Phone/Mobile No –

E-mail -

Letter of authorization (on Firm/Company's Letter head –

1. **The Name of Board/Licensee Office to which the grievance pertains**

Name of Board/Licensee Office –

Sub-Division –

Division –

Circle Office –

1. **Please tick only (√), as per the documents attached**
2. A full description of the matter, which is the source of grievance, including copies of any relevant and supporting documents (4 copies)
3. **Attached –**
4. **Not Attached –**
5. Latest Bill – **(Attached/Not-Attached)**
6. Supportive Documents - **(Attached/Not-Attached)**
7. Type of Appeal/Grievance **- (Against DSC/Direct)**
8. Whether 20% of Disputed Amt. deposited **– (Yes/No)** (If yes Attach the proof)
9. Whether represented before any other authority/proof/ Court or Forum in the Past other than DSC **– (Yes/No) (If Yes, Attach Proof/Copy of Order**)
10. Copy of Notice Issued by PSPCL Regarding Dispute Case **– (Attached/Not-Attached)**
11. Certificate Copy of Power of Attorney/Partnership Deed/Resolution (In case of Firm/Company) in Favor of Authorized Person along with Designation **– (Attached/Not-Attached)**
12. **Disputed Amount – Rs.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Subject –**

**Brief Description of Complaint –**

**Type of Relief –**

**List of Attached Documents –**

**Declaration**

**I/We, the Consumer/Authorized Signatory herein declare that:**

* I/We have not concealed or misrepresented any fact in the above proforma and documents submitted along with
* It is certified that the above mentioned matter is not pending before any other Court, Authority or Forum

Date: \_\_\_\_\_\_\_\_\_

(Signature of Consumer or Authorized Signatory)

(With Name and Designation)