

FOR OFFICIAL USE ONLY

Existing distribution line diameter _____ mm. Required service line diameter -----mm

Length of service -----Pipe materials -----Class-----

Applicant has been informed to provide materials and I confirm that the correct materials for connection have been purchased.

WATER SUPERINTENDENT: Signature-----Date-----

COMMERCIAL DIVISION

Supply Cluster _____ Zone No. _____

Category: **Residential / M-Commercial/ Commercial** _____ A/C No. _____

Applicant has paid Application fee Kshs. _____ Receipt No. _____ Date _____

Connection fee Kshs: _____ Receipt No. _____ Date _____

Deposit Kshs _____ Receipt No. _____ Date _____

Meter fees:Kshs. _____ Receipt No. _____ Date _____

Connection Card prepared by: _____ Signature _____ Date _____

ACCOUNTANT (W&S DEPT): Signature _____ Date _____

APPLICATION APPROVED ON BEHALF OF: Kiamumbi Water Trust.

GENERAL MANAGER _____ DATE _____

WATER RETICULATION UNIT

Service Line installation Certified by _____ Signature _____ Date _____

Meter Box Location Certified by _____ Signature _____ Date _____

BILLING UNIT

Meter No. _____ Initial Reading _____ Make _____

Installed by _____ Signature _____ Date _____

COMPUTER AND RECORDS

New Account Encoding by _____ Signature _____ Date _____

Verified by _____ Signature _____ Date _____