

## APPLICATION FOR SUPPLY OF ELECTRICITY/WATER

### IMPORTANT

Before completing this form please ensure you have proof of identity. If you are a company, incorporated association or a body corporate, a copy of the Certificate of Incorporation will be necessary. If you are a registered partnership a copy of the Registration Certificate will be necessary. Please note that in accordance with the Privacy Act, details of uncollected debts more than 60 days overdue and identifying particulars may be referred to a credit reporting agency and then become available to other credit providers.

### CUSTOMER DETAILS (please print in **BLOCK** letters)

Driver's license number.....

Full Name(s): ..... Date of Birth: .....

..... Date of Birth: .....

Postal Address: ..... Postcode: .....

Telephone Home: ..... Telephone Business: .....

Mobile No: ..... Email address: .....

### PROPERTY DETAILS FOR SUPPLY OF ELECTRICITY

Unit No: ..... Street No: ..... Lot No: .....

Street Name: ..... Town: NHULUNBUY ..... Postcode:0881 .....

Date Connection Required: ...../...../.....

Purpose for which supply required: **Domestic / Other** (Specify) .....

Is there Dogs at the property  Yes  No

Are there special reasons why supply cannot be interrupted without notice (such as life support systems, manufacturing processes)?

Life Support Equipment

Other (details) .....

*(Note: If there will be Life Support Equipment at the property – the Life Support Equipment Customer Information form will need to be completed.)*

**PLEASE NOTE ALL DEVELOPING EAST ARNHEM LIMITED (DEAL) PROPERTIES MUST BE IN THE NAME OF THE BUSINESS PLEASE ENSURE YOU READ AND UNDERSTAND THE TERMS AND CONDITIONS ON THE RESERVE OF THIS APPLICATION**

### PROPERTY DETAILS FOR SERVICE OF WATER ACCOUNTS

**Owner**  **Tenant**

Unit No: ..... Street No: ..... Lot No: .....

Street Name: ..... Town: NHULUNBUY ..... Postcode:.....

Date Connection Required: ...../...../.....

Purpose for which supply required: **Domestic / Other** (Specify) .....

Is there difficulty obtaining access to the property (such as locked gates, dogs)? .....

**ALL DEVELOPING EAST ARNHEM LIMITED (DEAL) PROPERTIES CANNOT TRANSFER WATER ACCOUNTS INTO BUSINESS NAMES**

### OTHER DETAILS

Name and Address of Employer: .....

Name and Address of agent or Landlord (if you are renting): .....

Full Names and Addresses of directors resident in the NT if you are a company; the Public Officer if you are an incorporated association or body corporate; Partners resident in the NT if you are a Partnership: .....

Upon vacating, do you wish to have a final invoice and/or any other electricity outstanding deducted from your BOND ? **YES / NO**

I/We, being the person(s) named above under Customer Details, hereby make application for **Supply** under the terms and conditions (see over leaf) for the time being applicable pursuant to the Relevant Act and the Special Purpose Lease Conditions.

.....  
**Signature of Applicant**

.....  
**Signature of Nhulunbuy Corporation Officer**

.....  
**Signature of Applicant**

.....  
**Date**

## TERMS & CONDITIONS

1. Supply will be given in accordance with the Electricity Reform Act.
2. If at any time a meter fails to register correctly or the Nhulunbuy Corporation representative cannot gain access for recording the registration the amount of electricity consumed in the period concerned may be estimated by reference to previous or subsequent registrations.
3. The Nhulunbuy Corporation as agent for Rio Tinto require the consumer to give security as follows:
  - a. \$100 for the owner/landlord of the premises
  - b. \$400 for the tenant of the premises.
4. Water bond applicable for Tenants, Landlord and Owner
  - a. \$200
5. The Nhulunbuy Corporation and Rio Tinto will not be responsible for any loss or damage suffered by the consumer or any other parties which may be caused or arise by reason or in consequence of either the operation or any failure in operation of the equipment at the consumer's premises and the consumer indemnifies the Nhulunbuy Corporation and Rio Tinto against any claim for such loss or damage and against all damages, costs, expenses and liabilities whatsoever arising by or in consequence of any such claim.
6. If by any reason of any strike, lockout, inclement weather, difficulty in obtaining replacement parts or interruption of supply the Nhulunbuy Corporation and Rio Tinto cannot fulfill its obligation from time to time, the Nhulunbuy Corporation and Rio Tinto will not be liable for any resulting failure of the consumer's electrical equipment or for any consequence thereof.

Failure to pay account by a due date may result in disconnection of your electricity supply.

| OFFICE USE ONLY  | SIGN AND DATE |
|--|---------------|
| OBTAIN COPY OF IDENTIFICATION FOR INDIVIDUAL COPY LICENCE  |               |
| OBTAIN COPY OF COMPANY IDENTIFICATION CERTIFICATE OF INCORPORATION   |               |
| ELECTRICITY TRUST NO:  |               |
| WATER TRUST NO:  |               |
| TOTAL TRUST AMOUNT PAID  |               |
| PROPERTY LOT NO  |               |
| RECEIPT NO:  |               |
| READ SHEET GENERATED   |               |
| LANDLORD NOTIFIED OF TENANT VACATING PROPERTY  |               |
| INTERIM INVOICE PRODUCED   |               |
| LIFE SUPPORT EQUIPMENT (LSE) CUSTOMER (identified in 'Customer Details' section of this form)  |               |
| LIFE SUPPORT EQUIPMENT CUSTOMER FORM COMPLETED AND EMAILED TO 'LSECustomerGove@riotinto.com'   |               |
| CONFIRMATION OF LSE CUSTOMER REGISTRATION BY GOVE OPERATIONS (Email to 'mcs@ncl.net.au')   |               |
| DEREGISTRATION AS LSE CUSTOMER (due to change of circumstances or medical confirmation form not completed) – email advice from Gove Operations |               |

**Why we need you to complete this form:** Gove Operations (part of Rio Tinto) supplies utilities to residential properties at Nhulunbuy, including electricity. It is important that Gove Operations is made aware of properties where one or more residents rely on life support equipment. This is so we can appropriately manage interruptions to services. It is also important that in the event of an emergency or outage, Rio Tinto knows how to contact residents who are reliant on life support equipment (or their emergency contact people).

We ask Customers (for supply of electricity) to complete this form so that we have this information. If you provide details of an individual resident who relies on life support equipment at your residence, please ensure that you have that person's consent to provide their personal information (including their health information) to us and show them the privacy statement below.

**Privacy Statement:** For the health, safety and administration purposes described above, you are requested to complete this form. The personal information that is collected through this form will be used by Gove Operations (and its external network contractors) to manage the supply of services. If you don't provide the personal information requested below, we may not be able to contact you or the individual resident reliant on life support equipment in the event of a planned outage, and we may not be able to prioritise supply of services for life support equipment. For more information about privacy at Rio Tinto, including information about how to exercise your rights or to make complaints, see the Rio Tinto Data Privacy Standard at [www.riotinto.com](http://www.riotinto.com) (go to 'Sustainability' and click on 'Policies and Standards'). If you have any privacy questions, you can contact [LSECustomerGove@riotinto.com](mailto:LSECustomerGove@riotinto.com)

| Customer details   | Please fill in details (if known at this time) |
|--|--|
| Property (street) address:   |  |
| Start date for life support equipment at the property e.g. today or future date:                   |  |
| Customer's name:   |  |
| Name of individual resident who relies on life support equipment (if different from the Customer): |  |
| Postal Address (if different from street address):   |  |
| Phone/Mobile number (of person requiring life support equipment):                                  |  |
| Email address (of person requiring life support equipment):  |  |

|   |  |
|---|--|
| Document Owner: <i>Electrical Network Officer</i> | Authorised By: <i>Superintendent Utilities</i> |
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| Customer details   | Please fill in details (if known at this time)  |
|--|---|
| Name of additional contact person to be notified of planned outages (Additional Contact):      |   |
| Additional contact person's mobile number(s) for SMS messages regarding planned power outages: |   |
| If known; the type of life support equipment at the property:                                  | <ul style="list-style-type: none"> <li>• An oxygen concentrator</li> <li>• An intermittent peritoneal dialysis machine</li> <li><input type="checkbox"/> A kidney dialysis Machine</li> <li><input type="checkbox"/> A chronic positive airways pressure (CPAP) respirator</li> <li><input type="checkbox"/> Crigler Najjar Syndrome photo therapy equipment</li> <li><input type="checkbox"/> A ventilator for life support</li> <li><input type="checkbox"/> Other – please specify:</li> </ul> |

Email completed form to [LSECustomerGove@riotinto.com](mailto:LSECustomerGove@riotinto.com)

|                 |                                   |                |                                 |
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