

# CHARTERS TOWERS ENERGY IMPROVEMENT PROJECT

## CUSTOMER REGISTRATION FORM

Name: \_\_\_\_\_

Business Name: \_\_\_\_\_

ABN: \_\_\_\_\_

Ph No.: \_\_\_\_\_

E-mail: \_\_\_\_\_

Address where solar/battery system will be installed:

Street No.: \_\_\_\_\_

Street Name: \_\_\_\_\_

Town: \_\_\_\_\_

Post Code: \_\_\_\_\_

### TO COMPLETE REGISTRATION:

- Please send this registration form and a copy of your past 12 months of electricity bills (front and back pages) to [mark@tropicalenergysolutions.com.au](mailto:mark@tropicalenergysolutions.com.au)

**NOTE:** Funding is available on a first in, first served basis. Customer registration is not complete until Tropical Energy Solutions has received a completed registration form 12 months of electricity bills.