

REFUND REQUEST FORM

(** Applicant's ID proof and proof of payment needs to be attached along with this form)

DATE of REQUEST*:	MC	BILE NO*:		
APPLICANT NAME*:	Ref No.	erence/UPAN *:		
DATE OF PAYMENT:	AM	OUNT PAID: (₹)		
SECTION NAME:	SUI	B-DIVISION NAME:		
DECLARATION BY APPLICANT				
I,, Understand				
1. That Refund will be provided either in the same account through which the payment was made OR , to the * <u>Account details of mine as mentioned below;</u>				
* <i>Please tick (✓) the given document</i>				
*Bank Name :	*IFSC Code:			
*Bank Account no.:				
2. That No refund will be provided for Processing fee, GST on Processing Fee and Inspection fee (Signature of Applicant)				
FOR SECTION / SUB-DIVISION OFFICE USE				
Meter Installed at Applied site: Yes / No If No, Reason for not Providing the connection:				
Refund Application Verified by	Name	Emp. No.	Signature	Date
Section In-Charge / Section Commercial Officer (SCO) / Section Manager (SM) / SDO				

TP NORTHERN ODISHA DISTRIBUTION LIMITED

(A Tata Power & Odisha Government Joint Venture) Registered & Corporate Office: Januganj, Remuna Golei, Balasore – 756 019, Odisha; **Call Centre / Toll free No:** 1800-345-6718, 1912; **Email**: <u>customercare@tpnodl.com</u>, **Website**: www.tpnodl.com CIN: U40109OR2021PLC035951