Horizon Power
PO Box P1145, Perth WA, 6844
Phone 1800 267 926
Facsimile 1800 420 998

Application for a new business electrical account

Details of new account*

** indicates mandatory fields*

Street number: | Unit No.: | Lot No.:*

Street name:*

Suburb:* | Postcode:*

Account details

Registered business name:

Trading name (if applicable):

Proprietor first name: | Proprietor surname:

Date of birth: d d m m y y | Contact name:

ABN:

Phone number* (B): | (W):

(M):

Email address

Postal address (if different from above)

Street number: | Unit No.: | Lot No.:

Street:

Or PO Box No.: | Suburb/Town:

State: | Postcode:

Details of account to be closed (if applicable)

Account number:* | Date to be closed:* d d m m y y

Please note: Your final invoice will be sent to your new mailing address. A final read will be completed within 3 business days of receipt of this request.

Declaration: I/We agree to allow Horizon Power to obtain a report containing information about my/our personal credit from a credit reporting agency or other agencies. I/We understand that Horizon Power's terms of payment will be as stated on the energy account and agree that all charges shall be paid on these terms. I/We understand that the electricity supply may be disconnected if these terms are not met.

Signature of proprietor or authorised representative:* | Date:* d d m m y y