Connection Application

Aurora ENERGY

Please send this form to: Network Connections Manager
P.O. Box 5140
DUNEDIN 9058

Phone:(03)479-6680
Fax: (03)474-9361
Email: networkconnections@auroraenergy.co.nz

Application Type (Choose one)

☐ New permanent connection ☐ New temporary connection ☐ Connection alteration

Electrical Contractor Details	No.	Customer Details	Appl. No.

Name: _____
Company: _____
Postal address: _____
_____
Phone: _____ Postcode: _____
Email: _____
☐ Quote only:

Name: _____
Company: _____
Postal address: _____
_____
Phone: _____ Postcode: _____
Email: _____
Electricity retailer: _____

New Connection

New connection use
☐ Residential
☐ Non-residential
☐ Controlled load? Provide details overleaf.

Temporary Connection

☐ Temporary 1 phase
☐ Temporary 3 phase
☐ Temporary on permanent mains
☐ Temporary – customer living on-site (caravan / shed etc.)

☐ Other type of alteration
_____
_____

Alteration to Existing Connection

☐ Customer mains renewal
☐ Mains entry box replacement
☐ Installation of notifiable load (note 1)
☐ New switchboard
☐ Renewal of aerial mains
☐ Shift or replace neutral screen
☐ Barge board replacement
☐ Capacity Increase (mains change)

Mains Details

☐ Aerial ☐ Underground – service pillar ☐ Underground – pole top ☐ Underground – transformer
☐ Subdivision of existing supply Mains size: _____ mm^2 ☐ Cu ☐ Al Length: _____ m

Installation Details

ICP No.: 0 0 0 0 | | | | | | | | E - | | | |

Address: _____ _____
_____ Section No.: _____ Block No.: _____
Lot No.: _____ DP No.: _____ Survey Dist: _____
Connection capacity: (note 3) No. of Phases _____ Amps per phase: _____ Capacity _____ kVA

New Notifiable Loads

Notifiable Load (note 1)	**kW**	**Details**	**Motors** (Function, e.g. Pump)	**kW**	**Starter Type**	**FLC (A)**

Office Use Only

Registry Code: ·
Loss type: ☐ LV ☐ HV

GXP: ☐ SDN0331 ☐ HWB0331 ☐ HWB0332 ☐ CYD0331 ☐ CML0331
☐ FKN0331 ☐ HER0111

Consent No: _____

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Controlled Loads	Notes / Sketch of Installation to be Connected (note 2)
☐ Standard water heating ☐ Day / Night ☐ Night only ☐ Irrigation ☐ Control Period Demand (CPD) ☐ Irrigation (Central Otago only) ☐ Night Boost (13hr) (Central Otago only) ☐ Controlled water heating (20hr) (Central Otago only) ☐ Other (specify) _____	

Notes

1. Notifiable loads are defined in Aurora's Network Connection standard, available from www.auroraenergy.co.nz/get-connected/
2. All applications for new installation must show a sketch of the site showing boundaries, building outline, mains entry point, and the location of poles and service pillars.
3. A table of standard LV connection capacities is shown to the right. Capacities above 276kVA will require installation of a transformer. Standard transformer capacities are 300, 500, 750 &1,000kVA.
4. The name of the person that will be responsible for payment of the electricity retailer's charges from the date of connection.
5. Details required for unmetered load are; type of load, power rating (watts) and daily hours of use.
6. NZECP34 defines electrical safe distances. Sections 2 and 3 detail the requirements.

Standard Low Voltage Connection Capacities

Fuse Size	Notes	1 Phase	2 Phase	3 Phase
63A	5A MCCB	1kVA **		
63A	20A MCCB			≤ 15kVA *
63A	32A MCCB	≤ 8kVA *		≤ 24kVA *
63A		≤ 15kVA	≤ 28kVA	≤ 41kVA
100A		≤ 23kVA		≤ 69kVA
150A				≤ 103kVA
200A				≤ 138kVA
250A				≤ 173kVA
300A				≤ 207kVA
400A				≤ 276kVA

* Reduced capacity connection with load limiting circuit breaker. Refer to Aurora's Network Connection Standard.
** Unmetered connection. Refer to Aurora's Network Connection Standard.

Office Use Only

Connection Contractor (all prices exclude GST)

Name:

Item Description	Price Code	Quantity	Price
Total cost of Aurora-owned works (a)			
Capital contribution (c = a – b)			
Total cost to Aurora (d = a - c)			
Customer owned works – if any (e)			
Inspection and Certificate of Compliance fee (g)			
Total cost to customer (h = c + e +g)			

Line Charge Increase	
'f' factor	x 1.5
Serviced capital cost (b)	

Substation site no.: _____ HV Feeder: _____

Substation ID: _____ LV Feeder: _____ **Consent No:** _____

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