



**THIKA WATER AND SEWERAGE COMPANY**  
**APPLICATION FOR METER REPLACEMENT AND TESTING**  
**FORM**

**PART I**

Water accounts Number.....

Applicants Name.....

Date Applied.....Phone Number.....

Plot Number.....Section.....street.....

Old Meter Number.....Current Meter Readings.....

Reason for Replacement.....

Signature.....

**PART II**

Validating Officer.....Date.....

Amount paid for new meter Kshs.....Receipt No.....Dated.....

Amount outstanding Bill.....as at.....

Commercial Manager.....Dated.....

**PART III**

Officer replacing meter.....sign.....Date.....

New meter serial number.....new meter no. readings.....

Date Replaced.....Issuing Officer Name.....

Signature of the Reconnecting office.....

Remarks.....

Internal Auditor.....

Billing Officer.....

Date Changed in the system.....