

**Abio Power LTD**

Supplier License No: Π017-2020

TSOC Participant No. 10056

Larnakos Avenue 62, 2101, Aglantzia, Nicosia

Tel: +357 22 278877 | Email: info@abio.com.cy

**CUSTOMER CONSENT****(DISCONTINUATION OF METER REPRESENTATION AND INTERRUPTION OF POWER SUPPLY)****TO: Distribution System Operator (DSO)**AHK Headquarters | Amfipoleos 11, Strovolos | 2025 Nicosia  
t: +357 22 201865 | f: +357 22 201490

Form Number: AB-10.01

**CUSTOMER DETAILS**

Full Name/ Company Name:

Company Registration No. (HE):

ID/ Passport No.:

Mailing Address:

Post Code:

City/ Village:

District:

Business Phone:

Mobile Phone:

E-mail Address:

**PREMISES DETAILS**

Premises Address:

Post Code:

City/ Village:

District:

Meter No.:

Account No.:

**DECLARATION OF CESSATION OF REPRESENTATION AND INTERRUPTION OF ELECTRICITY SUPPLY**

I, the client with the above mentioned information, in my capacity to legally represent the company/ natural person under the name ....., with registration number/ ID ....., having registered address/ residing in ....., authorize the company under the name "ABIO POWER LTD" with registration number HE407791 and registered office at **Larnakos Avenue 62, 2101, Aglantzia, Nicosia**, with a registered Electricity supply Licence No. **Π017-2020** issued by the Electricity Market Operator, to submit in my name and on my behalf any necessary document to the DSO and takes any required action under the applicable legislation for the cessation of representation of the meter related to the supply of the premises, of which I am the legal user, with the information described above, and the interruption of the electricity supply to that premises. I also declare that the desired date of interruption of the electricity supply, which cannot be less than thirty (30) days from the date of submission of the present, is ..... and I would like the final consumption bill to be sent to the above mentioned address.

Date: ...../...../.....

Supplier's signature/ Company stamp

Customer Signature/ Company Stamp

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