BURWOOD COUNCIL
Burwood Spring Celebrations

This form <u>MUST</u> be completed & returned with all other forms for your site to obtain power.

Power Requirements:

Name:

_____

Mobile Phone No:

_____

☐ No power required

☐ Power is required – please specify your requirements

For Office Use only:
Site Number: _____

Site Location: _____

_____

Please list <u>every</u> electrical item you will need to plug in and what amount of power is required to run each item:

Name / Description of each item:

No of items:	Name of item / Description:	10/15/20 Amps
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

No of electrical items in total: _____

***Beware* unlisted items may attract charges for power usage and supply.**
<u>All leads must be tagged</u>.