INTERNAL REFERENCE NUMBER



## REPS Activity Record (High Efficiency Refrigerated Display Cabinet)

## Page 1: Customer Declaration.

Customer Details								
Business Name:								
Trading Name:								
ABN / ACN:								
Name:								
Position:								
Email address:								
Phone:								
Address:								
Brand	Model	Quantity						
This activity does not cover the retrofitting of existing refrigeration	Total:							
Has this customer had this service before?								
If yes, what is the reason for the second visit?								
NB: If this form is signed prior to the installation date, the declaration is invalid without a completed proof of delivery document.								
Customer Declaration.								
Customer Signature:								
Date:	<ul> <li>The above activities are to be counted in satisfaction of Ecovantage (on behalf of an energy retailer's obligation under the Retail Energy Productivity Scheme);</li> <li>The information provided in this form is correct and complete;</li> <li>I have not received the above activities from another provider;</li> <li>I agree to allow this information to be used by ECOSA or other necessary parties for audit purposes;</li> <li>I understand that Ecovantage will collect information on this form for the purposes of complying with the Electricity Act 1996 and the Gas Act 1997 and authorise it to use and disclose information about me for this related purpose.</li> <li>Where the install causes sub-optimal operation, the installer shall reinstall equipment equivalent to the original equipment or replace components of the equipment that are causing the installation not to operate, at no expense to the recipient.</li> <li>To report sub-optimal operation of any Refrigerated Display Cabinets, please contact Ecovantage on 1300 721 335.</li> <li>The dispute resolution process has been explained to me and I have been supplied.</li> </ul>							
	The dispute resolution process has been explained to me and I have been supplied with contact details for the installer and Ecovantage to contact if I have any issues with the unit installed.							
Customer Signature:	For customers signing this form on or after the installation date I hereby declare, in addition to the statements above, that;  The above activities have been undertaken at my property							
Date:	I have received a copy of this assignment form							

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## REPS Activity Record (High Efficiency Refrigerated Display Cabinet)

Page 2: Installer Declaration. (At completion of installation)

Installer details									
Name:									
Phone Number:									
Company name:									
Customer Details									
Business Name:									
ABN / ACN:									
Consumer Name:									
Position:									
Email address:									
Phone:									
Address:									
nstaller Declation									
hereby declare that:									
I have conducted the activities below on behalf of Ecovantage; I have been trained to conduct the above installations in accordance with the REPS Code Mandatory Safety Training requirements; The activities above have been undertaken in accordance with the minimum requirements of the South Australian Government's Retailer Energy Productivity Scheme.									
nstaller Signature:									
Date:									
rand	Model	Total Display Area	Total Energy Consumption	Product Class	Serial Number	Quantity	Total Gigajoules		
This activity does not cover the retrofitting of existing refrigeration equipment.					Totals:				
Was any gassing or de-gassing required? Yes No									
Was any electrical work required? Yes No									
nstallation Date:									
					<del>-</del>				

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