

Need Assistance?

For your convenience, our **24/7** hotline numbers are always ready to take care of your concerns. Our Hotline Operators are waiting for your call:

(038) 427 - 2372
0920 - 960 - 2372

We want to make it easy for you!

Payment of your electric bills has never been more accessible! You may pay your bills through the following payment channels:

M LHUILLIER
Tulay ng PaMlyang Pilipino

FIRST CONSOLIDATED BANK
A PRIVATE DEVELOPMENT BANK

Bank of Commerce
An affiliate of San Miguel Corporation

LANDBANK **PALAWAN PAWNSHOP**
PALAWAN EXPRESS

SECURITY BANK

U SUPER SERVICE CENTER

APPLICATION REQUIREMENTS

Please bring **original and clear photocopy** of the following requirements upon application:

- 1. Certificate of Final Electrical Inspection**
Process your CFEI first at the City Engineer's Office. This is a government requirement.
- 2. One (1) Government Issued ID**
List of Acceptable IDs:
 - COMELEC Voter's ID
 - Driver's License
 - Firearm's License ID
 - GSIS ID
 - Integrated Bar of the Philippines ID
 - Philippines Passport
 - Postal ID
 - Professional Regulatory Commission License ID
 - Solo Parent ID
 - Unified Multipurpose ID
- 3. Letter signed by City Engineer's Office or Head of the Agency as applicable**
- 4. Sketch of location of meter to be installed**
- 5. Electrical Plan (signed and sealed by the PEE)**

APPLICATION PROCESS

STEP 1

Accomplish Application Requirements

Fill out Customer Application Form and secure all Application Requirement then submit to Bohol Light Office.



STEP 2

Await Load Inspection

Wait for Bohol Light's Technical team to conduct a load inspection at your household.

Please be present during the inspection process or have an authorized representative to be there on your behalf.

WITHIN 2 DAYS FROM APPLICATION



STEP 3

Prepare Your Service Entrance

Have your private electrician ready your service entrance wires and main circuit breaker for meter installation.



STEP 4

Pay Bill Deposit & Sign Service Agreement

Pay bill deposit and sign electric service agreement at Bohol Light office.



STEP 5

Meter Installation

Please be present during meter installation or have an authorized representative ready.

CONGRATULATIONS! You are now ENERGIZED!

WITHIN 2 DAYS FROM PAYMENT OF BILL DEPOSIT



BOHOLIGHT

Panuga Para sa Tanan, Kalipay sa Tanan!



(038) 427 - 2372
0920 - 960 - 2372



51 R. Enerio St., Tagbilaran City,
6300 Bohol



/bohollight

APPLICATION DETAILS

NEW APPLICATION

AMENDMENT

FOR AMENDMENT

Meter No. _____ Account No. _____

Existing Account Name _____

Existing Service Address _____

1 To whom will the service be registered?

GOVERNMENT ACCOUNT NAME

ALLOCATION

(PLEASE CHECK APPROPRIATE CIRCLE)

- | | | |
|---|--|-------------------------------------|
| <input type="radio"/> Gov't Foundation | <input type="radio"/> Gymnasium | <input type="radio"/> LGU Offices |
| <input type="radio"/> Periculture | <input type="radio"/> Health Care Center | <input type="radio"/> Market |
| <input type="radio"/> City Jail | <input type="radio"/> Outpost | <input type="radio"/> Barangay Hall |
| <input type="radio"/> Basketball Court | <input type="radio"/> Day Care Center | <input type="radio"/> CityHall |
| <input type="radio"/> City Gov't Hospital | <input type="radio"/> Schools | <input type="radio"/> Others |
| <input type="radio"/> National | <input type="radio"/> Provincial | |
| <input type="radio"/> City Streetlights | | |

2 Where will the service be used?

SERVICE ADDRESS

(UNIT NO., FLOOR, BUILDING, BLOCK NO.)

(STREET, SUBDIVISION)

BARANGAY

DISTRICT

3 Who will be responsible for this service application?

LAST NAME

SUFFIX

(JR, III, etc.)

FIRST NAME

BIRTHDAY

(MM-DD-YYY)

MIDDLE NAME

SEX

(MALE/FEMALE)

DESIGNATION

EMAIL ADDRESS

TELEPHONE NUMBER

MOBILE NUMBER

4 Is the billing address same with the service address? If not, please fill in below.

BILLING ADDRESS

(UNIT NO., FLOOR, BUILDING, BLOCK NO.)

(STREET, SUBDIVISION)

BARANGAY

DISTRICT

Please do not forget to provide a location sketch of your service address on the next page.

5 Please certify that the information you provided are sword to be correct.

I hereby certify that all information provided is certified true and correct.

APPLICANT'S SIGNATURE OVER THE PRINTED NAME

THIS PORTION IS FOR BOHOL LIGHT USE ONLY.

APPLICATION TYPE

- City Offices Other Gov't City Streetlights

APP NO.

REMARKS

LOCATION SKETCH OF SERVICE ADDRESS

(PLEASE INDICATE LANDMARK/S)

BOHOL LIGHT

APPLICATION STUB : CUSTOMER'S COPY

Customer Account No: _____
Account Name: _____
Processed By: _____ Date Applied: _____
Load Inspection Report No: _____ Date Inspected: _____
Inspected By: _____ Date Paid: _____
Bill Deposit Amount: _____
Ref No: _____ Payment Center/Bank: _____

This stub must be presented during load inspection. and bill deposit payment.

BOHOL LIGHT

APPLICATION STUB : PAYMENT CENTER'S COPY

Customer Account No: _____
Account Name: _____
Processed By: _____ Date Applied: _____
Load Inspection Report No: _____ Date Inspected: _____
Inspected By: _____ Date Paid: _____
Bill Deposit Amount: _____
Ref No: _____ Payment Center/Bank: _____

This stub must be presented during load inspection. and bill deposit payment.