



Water Authority Of Fiji
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WE_CS011

FREE WATER USAGE ALLOWANCE FORM

METER NUMBER _____

ACCOUNT NUMBER _____

1. CUSTOMERS FULL NAME _____

2. RESIDENTIAL ADDRESS _____

3. TIN NUMBER _____

(COPY OF TIN LETTER OR JOINT FNPf/FIRCA CARD TO BE ATTACHED)

4. PHOTO ID

| FNPf/FIRCA | PASSPORT | VOTER REGISTRATION | DRIVERS LICENCE | OTHERS |
|------------|----------|--------------------|-----------------|--------|
|------------|----------|--------------------|-----------------|--------|

(CUSTOMERS TO PROVIDE ANY OF THE FOLLOWING IDS TO BE ATTACHED WITH THIS FORM)

5. OCCUPATION _____

6. ANNUAL INCOME _____

7. This form MUST be submitted with the following form/document

- ☐ **Statutory Declaration Form** -Duly signed and stamped by a JP/Legal Officer/District Officer or Provincial Officer
- ☐ **WAF Customer Information Form (CIF)**
- ☐ **Valid Photo ID**
- ☐ **TIN Letter or Joint FNPf/FIRCA Card**
- ☐ **Latest Payslip** (If employed)

FOR OFFICIAL USE ONLY

| | | | |
|-------------------------|---|--------------------------------|--|
| DIVISION | <input type="checkbox"/> WEST | <input type="checkbox"/> NORTH | <input type="checkbox"/> CENTRAL EASTERN |
| APPLICATION NUMBER | | | |
| VERIFIED AND UPDATED BY | | DATE : _____ | |
| STAMP | The following form/documentations has been provided by the customer <input type="checkbox"/> Statutory Declaration Form <input type="checkbox"/> WAF CIF Form <input type="checkbox"/> Valid Photo ID <input type="checkbox"/> TIN Letter or Joint FNPf/FIRCA Card <input type="checkbox"/> Latest Payslip | | |
| ENDORSED BY | | DATE : _____ | |