

OFMAT Meter Accuracy Test – Request Form

MARKET PARTICIPANT		JOB INFORMATION	
Market Participant ID (A0064)		Transaction Reference (A0055)	
Market Participant Location		Job Type	
Contact Name (A0088,A0089,A0090)			
Contact Mechanism (A0049)			
Contact Mechanism Value (A0106)		MPRN (A0072): Provide additional information if MPRN n/a.:	
Contract Reference (A0053)		Existing Meter Serial Number (A0022):	
CONSUMER DETAILS		Market Sector Code	
Contact Name (A0088,A0089,A0090)		Order Date	
Contact Mechanism (A0106)		Appointment Date (A0138):	
Contact Mechanism Value (A0106)		Time Band (A0140):	
		Additional Information	
JOB ADDRESS		ALTERNATIVE CONTACT/ ADDRESS DETAILS	
Sub Building Name/Number (A0004)		Address Type Code (A0102)	
Sub Building Name (A0006)		Contact Name (A0088,A0089,A0090)	
Sub Building Number (A0008)		Sub Building Name/Number (A0004)	
Thoroughfare (A0008)		Thoroughfare (A0008)	
Post Town (A0011)		Post Town (A0011)	
Post Code (A0013)		Post Code (A0013)	
Meter Location Code (A0059)		Contact Mechanism (A0049)	
Asset Location Notes (A0158)		Contact Mechanism Value (A0106)	
ACCESS INSTRUCTIONS (A0075):			
ACCESS PASSWORD (A0101)		CARE CATEGORY (A0039)	
Signed:		Date:	
As per contract			