Meter readings template

| NAME: | ADDRESS: |
|--------------------------------|--|
| Can you please fill in this fo | orm on a regular basis: weekly, bi-weekly or monthly. If possible try to do so on the same day of the week or month. |
| Any issues please contact Mr. | ./Mrs.: |
| Email: | Phone: |

| | DATE | ELECTRICITY | GAS / OTHER FUEL: | Comments (e.g. Fuel Units- m³ or ft³) |
|----|------|-------------|-------------------|---------------------------------------|
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