



Priority Services Customer Registration Form

Thanks for your interest in our Priority Services, for customers with special requirements. You – or someone acting on your behalf – can register with us and tell us about any requirements you may have.

Please sign and return this form to **Freepost ECOTRICITY**. We'll need to tell your local electricity/gas distribution company and our meter reading agent about your requirements, as they need this information for access and maintenance work. All the information you provide will be treated as confidential.

If you need any help completing this form – or would like to talk to us about it – please call us on **0345 555 7 100**, or if you'd prefer to call a landline, you can contact us on **01453 761 482** or email **home@ecotricity.co.uk**.

Who's eligible?

You, or anyone in your household, can register if they:

- have a chronic illness
- are of pensionable age
- are blind or partially sighted
- are deaf or hard of hearing, or
- have another type of disability or special need
- have children under the age of five living in the property
- have a temporary illness.

Priority Services on offer

- freephone priority service careline - so your call can be answered quicker
- textphone communications with our customer services staff
- password scheme – so you can be sure of representatives when they visit your home
- bills in alternative formats, including Braille, large print and talking bills
- possibility of moving your meter to an accessible location.
- priority for reconnection
- notification when your area network company are scheduling planned work

Your personal details

Full name:

Telephone number:

Postcode:

Email address:

Account no:
(if known)

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Preferred contact method:

Phone

Email

Letter

Please tick if there are any members of your household of a pensionable age including yourself

Please tick if there are any children under the age of five living in the property

Please tick if anyone in the property has a temporary illness and indicate how long their recovery is expected to take. _____

Details of your needs for priority service

Hearing:

Sight:

Mobility:

Medical equipment:

Other – please specify:

If you're hard of hearing

Please provide a textphone number: _____

If you're visually impaired please tick if you require

Talking bills

Braille bills

Large print bills

Language if not English _____

Representative

Do you have a representative we could contact on your behalf? If so, please provide contact details below:

Full name:

Telephone no:

Password scheme

We offer a password scheme for extra security. We'll only give your password to members of staff and agents who need to know it. They'll quote it to you when they call at your home. If you'd like to change your password, please call us on **0345 555 7 100**.

Password: (8 letters max)

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Agents visit

Please note our agents will visit between the hours of 8am and 8pm.

Passing on your details about your special requirements

So that we can give you the most appropriate service, we'd like to tell the people who may need to carry out work at your property about your requirements.

Please sign below to give your consent, so that we can share the relevant details you've told us about on this form with your local electricity/gas network operator.

Signed: _____

Date: _____

We may also need to disclose the information that you've provided to OFGEM, their agents, or other 3rd parties, in order to comply with our obligations under the supply licences which allow us to operate as a supplier of electricity and gas. We will not use this information for sales or marketing purposes. If you are happy for us to disclose your information for this purpose, please tick.

Please complete this form and return to **Freepost ECOTRICITY** (no further address details are needed)