

Application to join the Priority Services Register



Name:

Address:

Postcode:

Home tel:

Mobile tel:

Email:

For security – write password below

Declaration:

I confirm that the details I have given are true and correct.

Privacy Notice: As a Priority Service Customer we collect and process your personal data so that we can contact you if you experience a power interruption.

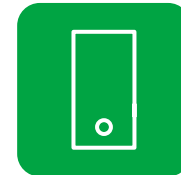
We will process your personal data in accordance with all applicable laws and legislation. We will also share this information with your energy/utility supplier (whoever you chose to pay your bill to), their agents and third parties in order that they may provide the required support. For further details about your rights and how we process your personal data please see the Full Privacy Notice available on our website www.spenergynetworks.co.uk/pages/privacy.aspx or contact the Data Protection Manager at DP@spenergynetworks.co.uk.

You can also contact us by writing to us at:
Data Protection Manager, SP Energy Networks, 320 St Vincent Street, Glasgow G2 5AD.

*Other organisations include trusted charities such as the British Red Cross, who may assist during incident situations to support companies in safeguarding you and other household members.

How to register for priority services

Use our website to submit an on-line application form or complete the attached form and post it to the address below.



0330 10 10 167

spenergynetworks.co.uk/priorityservices

customercare@spenergynetworks.com

If you live in Central & Southern Scotland please write to:

Customer Contact Team
SP Energy Networks
3rd Floor
320 St Vincent Street
Glasgow G2 5AD

If you live in Cheshire, Merseyside, North Wales or North Shropshire please write to:

Customer Contact Team
SP Energy Networks
3 Prenton Way
Prenton CH43 3ET

This leaflet is also available in Welsh. Should you require a copy, please call **0330 10 10 167** or visit spenergynetworks.co.uk

Calls to 03 numbers cost no more than a national rate call to an 01 or 02 number and must count towards any inclusive minutes in the same way as 01 and 02 calls. These rules apply to calls from any type of line including mobile, BT, other fixed line or payphone.

SCP7872 AUG 24 V5



Extra support during a power cut


Priority Services Register



How to register for priority services

In the event of a power cut, our teams work around the clock to restore your electricity as quickly as possible. We appreciate for some customers this may be particularly distressing and that's why we offer extra support to customers who feel they need our help.

We keep a Priority Services Register so that we can contact our most vulnerable customers if they do experience a power interruption.




You can join our Priority Services register if you:


- Are over the age of 60
- Have a special communication need
- Depend on electricity for home or medical care
- Have a child under 5 years of age
- Have a chronic illness
- Or just feel you need a little extra help.

You can also register with us if you feel you need support for a short period of time e.g. if you're recovering from an operation, if you are pregnant, or if you are recently bereaved.

Being on the register won't necessarily mean we can restore your power more quickly, however where possible we will try to proactively contact you if we know of a problem in your area. This might not always be possible as we may be unaware that you have had a powercut, so please **contact us on 105** if you are without power or call our dedicated PSR line on **0330 10 10 167**.



It won't cost you a penny to join – our Priority Services Register is a **FREE service**. Sign up for the Priority Services Register by using the form to the right or by calling us on **0330 10 10 167**.



To update your details or to be removed from the Priority Services Register simply contact us on **0330 10 10 167**.

What we offer our Priority Services customers

If you register with us;

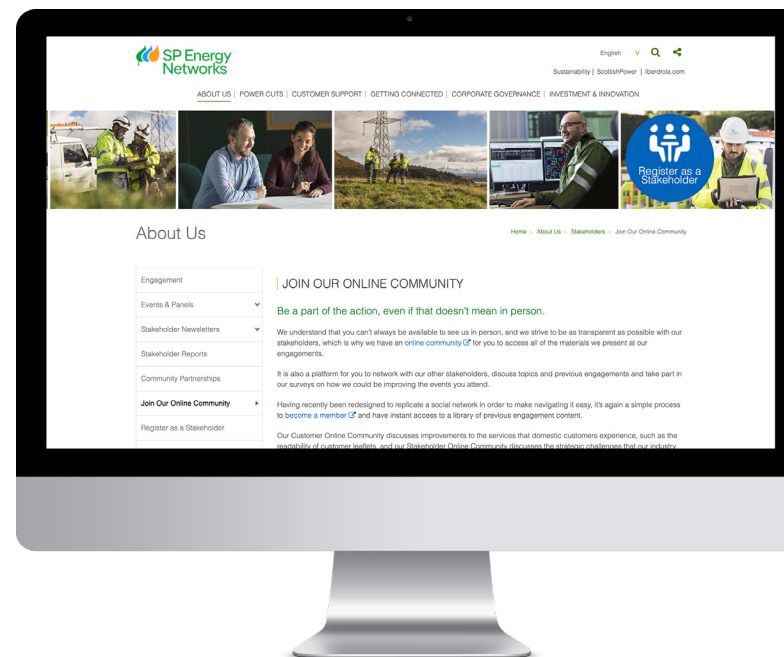
- We will let you know in advance of a planned interruption to your electricity supply
- We will keep in touch with regular updates during a power cut and if necessary, we can work with external agencies who may be able to assist



Passwords

If you are blind, have poor sight or you would just like to feel more secure, you can agree a password with us whenever you make an appointment.

Online Community
If you would like to help shape the service offered by SP Energy Networks and help us to identify ways to make improvement please take the time to join our online community at: www.spenergynetworks.co.uk/online_community



Please tell us about your needs below by ticking all the boxes that apply to you:



Medically Dependent Equipment	Heart, Lung or ventilator machine <input type="checkbox"/>
	Dialysis, feeding pump and automated medication <input type="checkbox"/>
	Oxygen concentrator <input type="checkbox"/>
	Nebuliser <input type="checkbox"/>
	Sleep apnoea monitor <input type="checkbox"/>
	Medically dependent on electric showering <input type="checkbox"/>
	Careline/telecare system <input type="checkbox"/>
	Medicine refrigeration <input type="checkbox"/>
	Stair lift <input type="checkbox"/>
	Bath hoist <input type="checkbox"/>
	Electric bed <input type="checkbox"/>
Safety	Oxygen use <input type="checkbox"/>
	Poor sense of smell <input type="checkbox"/>
Poor Mobility	Physical impairment <input type="checkbox"/>
	Unable to answer door/restricted movement <input type="checkbox"/>
	Restricted hand movement <input type="checkbox"/>
Age Related	Pensionable age <input type="checkbox"/>
	Families with children under 5 years of age <input type="checkbox"/>
Communications	Blind <input type="checkbox"/>
	Partially sighted <input type="checkbox"/>
	Hearing impairment <input type="checkbox"/>
	Speech impairment <input type="checkbox"/>
	Unable to communicate in English <input type="checkbox"/>
	Please tell us the language you would prefer to use: <input type="checkbox"/>
Health	Chronic/serious illness <input type="checkbox"/>
	Dementia(s) <input type="checkbox"/>
	Developmental condition <input type="checkbox"/>
	Mental health <input type="checkbox"/>
	Additional presence preferred <input type="checkbox"/>
	Water dependant <input type="checkbox"/>
Temporary	Temporary - Life changes <input type="checkbox"/>
	Temporary - Post hospital recovery <input type="checkbox"/>
	Temporary - Young adult householder (<18) <input type="checkbox"/>