



Important Information for Medically Dependent Customers



Does your life depend on electricity?

Do you, or does someone in your household, depend on electricity for Critical Electrical Medical Equipment (CEME)? Is your health or wellbeing especially vulnerable? Please let us know.

1. Simply fill out the form in this booklet. This form can also be completed online, visit www.mainpower.co.nz. Alternatively, please contact our team urgently on 0800TellIMP (0800 835 567).
2. Get written confirmation from your doctor or healthcare professional outlining the equipment you have at home.
3. Send both the form and the confirmation to MainPower as soon as possible.

When we have this information, we will know that power outages would present a threat to your health or wellbeing.

Make sure you have a backup plan

We can never guarantee your power supply at all times, as temporary outages can occur. We urge you to have a clear emergency response plan. This could include always having a standby battery that is fully charged and ready to use. It could also include plans to immediately relocate to another address which has electricity supply.

For more information on vulnerable or medically dependent customers, visit the Electricity Authority website www.ea.govt.nz.



Medically Dependent Customer

This form is to be completed to confirm that the customer is using mains electricity dependent Critical Electrical Medical Equipment (CEME). Upon confirmation that the CEME is supplied or prescribed by the DHB, Private Hospital or a General Practitioner, the customer will be placed on MainPower's Medically Dependent Register.

ICP Number (if known): _____

Account Name: _____

Property Address: _____

Phone Number: _____

Email Address: _____

A member of my household is dependent on medical equipment.

Name of person: _____

Type of medical equipment required: _____

Is the medical equipment portable? YES / NO

I have attached written confirmation from my health professional outlining the critical medical equipment at the property.

I confirm that I have an emergency response plan in place in case of a temporary electricity outage.

Please provide an alternative emergency contact.

Name: _____

Relationship to you: _____

Phone: _____

Please return completed form to MainPower.

Post: PO Box 346, Rangiora 7440

Email: feedback@mainpower.co.nz



Contact us

To report a medically dependent customer:

0800 835 567

For electrical emergencies:

0508 60 70 80

For general enquiries:

www.mainpower.co.nz

info@mainpower.co.nz

03 311 8300 (8am to 5pm, Monday to Friday)


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