

Steuben Rural Electric Cooperative, Inc.

9 WILSON AVENUE
BATH, NEW YORK 14810-1633
(607) 776-4161 FAX: (607) 776-2293 (800) 843-3414

CERTIFICATION OF MEDICAL OR LIFE SUPPORT EQUIPMENT

Outage Restoration

When circumstances permit doing so, the Cooperative uses this information to prioritize outage restorations. Having the proper documentation on file is an important component of this process. If you have medical or life support equipment that is dependent upon electricity, please complete the following. There are circumstances in which the Cooperative is unable to prioritize based on medical needs, so it is important to have another source that can power your medical or life support equipment in the event of an outage.

Disconnect for Nonpayment

In accordance with 21 CRR-NY 459, the Cooperative is not permitted to disconnect for nonpayment when we know or reasonably should know, that the discontinuance of electric service could lead to an impairment of human health. As such, it is important that individuals with medical or life support equipment that is dependent upon electricity, complete the following to ensure that the Cooperative is aware that discontinuance of electric service for nonpayment could impair human health.

In accordance with 21 CRR-NY 459.9, information concerning the circumstances where it is found that discontinuance of service would lead to serious impairment to human health, and there is a schedule disconnect for nonpayment, the account must be referred to the local social services commissioner and documented. The Cooperative may only disconnect for nonpayment if the local social services commissioner, after an investigation, informs the Cooperative that the health-impairing condition does not exist or is not serious, or that an alternative means for protecting the person's health has been devised.

General Information

The Cooperative will make reasonable efforts to update medical certifications on an annual basis. As such, you may be requested to send in an updated certification. As referenced in 21 CRR-NY 459.10, the Cooperative is not liable for failure of any member to furnish such information.

Medical or Life Support Equipment Information

By signing below, I authorize my medical provider to give all information required to substantiate my claim of having medical or life support equipment that is dependent upon electricity. I understand that the Cooperative is required under HIPPA to treat this information as confidential medical information and allow access only to those with a need to know. All medical information provided with this request will be properly stored.

Member Name (Print): _____

Member Signature: _____

Account Number(s): _____

Service Address(s): _____

Type of Medical or Life Support Equipment:

Physician Certification

- 1.) Is this a condition that requires the use of medical or life support equipment that is powered by electricity?

- 2.) Is there an alternative source of energy that can be used as a backup during power outages? If so, what is the cycle life of the alternative source?

- 3.) Is there an expiration to this certification based on the medical condition? If so, what is the duration that is applicable for this certification?

- 4.) What is the type of medical or life support equipment required? In your professional judgement, would the loss of electricity impair human health?

Physician Name (Print): _____

Physician Signature: _____

Date of Certification: _____

Physician Phone Number: _____

Physician Address: _____

Return Information

Please mail, fax or return a copy of the completed certification to one of our branch offices:

<u>Bath District</u>	<u>Cherry Creek District</u>
Steuben Rural Electric Cooperative, Inc.	Steuben Rural Electric Cooperative, Inc.
Attn: Billing Department	Attn: Billing Department
9 Wilson Avenue	5966 South Road
Bath, New York 14810	Cherry Creek, New York 14723
Phone: (607) 776-4161	Phone: (716) 296-5651
Fax: (607) 776-2293	Fax: (607) 776-2293