

Your Life Support Equipment registration

NSW



If you've let us know that Life Support Equipment is in use at your home, there's a few things you need to do to complete your Life Support Equipment registration.

1. Check the list of machines eligible for Life Support Equipment registration to ensure your equipment is listed.
2. Complete your Medical Confirmation form and return it to us by the due date.
3. Prepare an action plan in case of an outage, planned or unplanned.
4. Check [agl.com.au/concessions](https://www.agl.com.au/concessions) for the full list of rebates you may be eligible for as a Life Support customer.
5. If you are making this application under power of attorney then you must attach a certified copy of your power of attorney with this form.

Planning for the unexpected

If your home loses energy unexpectedly, it's important that everyone in your house knows what to do:

- Keep your action plan and the phone numbers for AGL and your energy distributor in a convenient location so you can find them easily.
- Remember to check that your electricity main switch and gas meter handle are in the correct positions.
- Consider contacting your distributor to see how long the outage will last.
- If you're totally dependent on your equipment, follow your plan and call **000** for emergency medical assistance if required.

Why should I register my Life Support Equipment?

By registering your Life Support Equipment, AGL and your distributor will give you four days advance written notice of any planned outages. Other restrictions on disconnecting power to your home will also be applied.

What happens if I move house or I'm no longer with AGL?

If you move house, you'll need to complete a new Medical Confirmation form to ensure your equipment is registered at your new address.

Similarly, if you change energy retailers, you'll need to contact them to register your Life Support Equipment as you'll no longer be covered by AGL.

Who to call during an outage

Here are the 24-hour emergency numbers for the energy distributors in your state:

Electricity

Ausgrid	131 388
Endeavour Energy	131 003
Essential Energy	132 080

Gas

Jemena Gas Networks (NSW)	131 909
Australian Gas Networks	1800 898 220
Central Ranges Pipeline	1800 676 300

Am I eligible for a rebate?

Once we receive your Medical Confirmation form, the NSW Government Life Support rebate will be applied to your account. You don't need to be a concession card holder to receive the rebate.

Check [agl.com.au/concessions](https://www.agl.com.au/concessions) for a full list of energy rebates you may be eligible for.

What happens if I don't need Life Support Equipment registration anymore?

If you no longer need your Life Support Equipment registered, call us on **131 245** to let us know. We'll send you a letter to confirm that you're no longer a Life Support customer and remove the protections on your home.

Looking for more information?

For more information on being an AGL Life Support customer, visit [agl.com.au/lifesupport](https://www.agl.com.au/lifesupport) or call us on **131 245** anytime, 24/7.

Medical Confirmation form - New South Wales



By completing and returning this form you'll satisfy the regulatory requirement to provide Medical Confirmation for Life Support Equipment.

If your Life Support Equipment is already registered, you still need to complete this form to apply or reapply for the NSW Government Life Support rebate or other rebates. To continue receiving the NSW Government Life Support rebate, you'll need to provide a new Medical Confirmation form every four years.

Issue date:	<input type="text"/>
Due date:	<input type="text"/>

How to complete this form

1. Check the list of machines to ensure that your equipment is eligible for Life Support registration. You can view the full list in **Section 2** below or at agl.com.au/lifesupport
2. Complete **Sections 1 and 2** to provide details of the AGL account holder and the patient.
3. Have **your medical practitioner** complete the declaration in **Section 3**. This section needs to be signed and dated by your medical practitioner to be accepted by AGL.
4. Provide any concession details in **Section 5 (see overleaf)**. Please note that you don't need to be a concession holder to receive the NSW Government Life Support rebate.
5. Ensure you read, sign and date the declaration in **Section 6 (see overleaf)** and return the form to AGL by the due date above. We suggest you also keep a copy of this form for your records.

If you need more time to complete this form, call us on **131 245** before the due date above to request an extension.

Section 1 – AGL account holder details

Title:	<input type="text"/>	Full name:	<input type="text"/>		
Address:	<input type="text"/>		Suburb:	<input type="text"/>	
State:	<input type="text"/>	Postcode:	<input type="text"/>	Telephone:	<input type="text"/>
Email:	<input type="text"/>				
AGL account number:	<input type="text"/>				

Section 2 – Patient details

Title:	<input type="text"/>	Patient's name:	<input type="text"/>		
Address:	<input type="text"/>		<input type="checkbox"/>	I reside at the address in Section 1 & my equipment is in use at this address	
Type of machine (please tick appropriate box):			Date energy supply for Life Support Equipment is required:	<input type="text"/> / <input type="text"/> / <input type="text"/>	
<i>Machines eligible for Life Support registration and electricity rebate</i>					
<input type="checkbox"/> Enteral feeding pump	<input type="checkbox"/> External heart pump	<input type="checkbox"/> Home dialysis machine			
<input type="checkbox"/> Oxygen concentrator – 24 hr use	<input type="checkbox"/> Oxygen concentrator – less than 24 hr use	<input type="checkbox"/> Phototherapy equipment			
<input type="checkbox"/> Positive Airways Pressure Device (PAP) – 24 hr use	<input type="checkbox"/> Positive Airways Pressure Device (PAP) – less than 24 hr use	<input type="checkbox"/> Ventilators for Life Support			
<input type="checkbox"/> Power wheelchair – for quadriplegics	<input type="checkbox"/> Total Parenteral Nutrition (TPN) pump				
<i>Machines eligible for Life Support registration only</i>					
<input type="checkbox"/> Other (required for Life Support – please specify equipment)	<input type="text"/>				

Section 3 – Medical practitioner declaration

MANDATORY INFORMATION: Fuel required for Life Support Equipment use			<input type="checkbox"/> Electricity	<input type="checkbox"/> Gas	
Name:	<input type="text"/>	Job title:	<input type="text"/>		
Provider number:	<input type="text"/>	Name of medical practice/hospital where patient was reviewed:	<input type="text"/>	Phone number of medical practice/hospital:	<input type="text"/>
I certify that the machine(s) indicated on this form is required for the patient detailed in Section 2.					
Signature:	<input type="text"/>			Date:	<input type="text"/> / <input type="text"/> / <input type="text"/>

Please see overleaf to complete sections 4, 5 and 6.

Section 4 – Consent for person to act on your behalf (optional)

Only complete this section if you would like someone to act on your behalf in relation to this application.

I authorise , who can be

contacted by phone on to:

- speak to my energy retailer on my behalf to assist with processing this application
- clarify any information provided in this form to assist with processing this application.

I have confirmed with the above nominated person that they agree to act on my behalf and advised them that their information will be collected and managed in accordance with the Privacy Notice in this form.

I understand that this consent is only provided to act in relation to this application and is not provided to act on behalf of or in relation to my electricity account with my retailer.

I understand that I can withdraw this consent at any time by contacting my energy retailer.

Section 5 – Concessions

Please indicate the type of concession you hold, if applicable.

You don't need to be a concession holder to receive the NSW Government Life Support rebate.

Pensioner concession
card number:

Department of Veteran's
Affairs Gold card number:

Healthcare card
number:

Date concession card
was granted: / /

Section 6 – AGL account holder declaration and authorisation statement

I (insert name), of (insert principal place)

of residence), :

- The supply address for my electricity account is the primary place of residence for this patient (if patient is different from the applicant/ electricity account holder).
- I understand that to ensure priority of supply for the Life Support machine, AGL will need to provide my application details to the relevant electricity distributor.
- I understand and agree that AGL will retain a record of this consent.
- I declare that all particulars and all information provided in this application is, to the best of my knowledge, true and correct.
- I have read and understood all information in this application form, including the Checklist and Privacy Notice.
- I understand that it is my responsibility to notify **AGL** of any changes to the information I have provided in this form.
- I agree to provide additional information about my eligibility on request.
- I understand that this application, once signed, remains valid unless I withdraw it by contacting **AGL**.

Power of attorney (when application signed under power of attorney)

I have attached the certified copy of the power of attorney with this application.

Applicant signature:

Date: / /

Privacy Notice

The Department of Planning, Industry and Environment (the Department), located at 4 Parramatta Square, 12 Darcy Street, Parramatta NSW 2150, is subject to the Privacy and Personal Information Protection Act 1998 in managing your personal information. Your energy retailer and the Department are collecting your personal information for the purposes of processing your application for an energy rebate (including assessing your eligibility), paying a rebate to you if you are eligible, administering the energy rebates scheme and auditing the rebate program which may include surveying customer experiences. In completing this form you may provide the personal information of another person. Before you provide this information you must seek the consent of that person to disclose their information to your energy retailer and the Department, and for it to be used in accordance with this Privacy Notice. Your energy retailer and the Department may disclose your personal information to a third party engaged to carry out an audit of the rebate.

Your energy retailer and the Department will not disclose your personal information to anybody else unless authorised by law. Applying for this rebate is voluntary. However, if you decide to apply, unless otherwise noted, all personal information requested directly from you must be provided to your energy retailer for your retailer to process your application.

You have the right to access the personal information that the Department holds about you. You also have the right to request that the Department updates or amends this information. For further details, email: rebates@mail.energysaver.nsw.gov.au

For further details on how AGL handles your personal information, visit agl.com.au/privacy

Arabic

هل تحتاج مترجم؟ اتصل على الرقم أدناه:

Spanish

¿Necesita un intérprete? Llame al número indicado abajo.

Italian

Se vi serve un interprete, telefonate al seguente numero.

Greek

Αν χρειάζεστε διερμηνέα, τηλεφωνείτε στον αριθμό παρακάτω.

Croatian

Trebate li pomoć tumača? Nazovite niže navedeni broj.

Vietnamese

Nếu quý vị cần sự giúp đỡ, vui lòng gọi số bên dưới.

Chinese

如果您需要傳譯員的幫助，請致電以下號碼。

For language assistance please call **1300 307 245**.