



Priority & Special Services Customer

Registration Form



PrepayPower Limited
Paramount Court, Corrig Road,
Sandyford Industrial Estate, Dublin 18,
D18 R9C7

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Priority and Special Services

At PrepayPower we want to continue to ensure that our service is suitable for your needs.

In order to continue providing the best service to you, it is required that you fill in and return the forms included.

Pay as you Go suppliers are unable to supply customers who are dependent on an uninterrupted supply of electricity. A prepayment service also may not be suitable for the visually impaired due to the nature of the service. If it is found that our services are no longer suitable, we will be happy to assist you in finding a suitable supplier.

We have issued this letter to you because we need you to identify yourself to us as a vulnerable customer, and it is important to note that we must share this information with ESB Networks and Gas Networks Ireland to assist them in identifying customers who may be at risk when there is interruption to your supply.

ESB Networks and Gas Networks Ireland must also provide this information to any new supplier that you move to.

The first form allows you to nominate another person, with their consent, to operate the electricity and/or gas account on your behalf, should you so wish to do so.

Please also note that we can provide full customer service via email and can arrange to contact you via SMS if you are aurally impaired. Simply fill in the last form in this document to register formally for these services.

The forms on the following pages will allow you to register for priority or special services if you are in any of the categories that qualify you as a vulnerable customer (for both gas and electricity).

Once your form has been completed simply post to;

Priority Services Manager, PrepayPower Ltd, Paramount Court, Corrig Road, Sandyford, D18 R9C7.

Thank you for choosing us as your energy supplier,

The PrepayPower team.

Registration Form

Signature of Alternative Contact:

Name	
Address	
Date of Birth	/ /
Contact Number	
Mobile Number	
Minicom Number (if applicable)	
Face it Antalana	
Email Address	
MPRN or Prepayment Card Numbe	
MPRN or Prepayment Card Numbe	
MPRN or Prepayment Card Number GPRN (for Gas Customers) ow would you like to Email SMS you wish to have an alternative	be contacted?
MPRN or Prepayment Card Number GPRN (for Gas Customers) ow would you like to Email SMS you wish to have an alternative	Phone Post The person to manage your account, that's now a details and ask them to sign this form:
MPRN or Prepayment Card Number GPRN (for Gas Customers) ow would you like to SMS you wish to have an alternative oblem at all. Simply fill in their	Phone Post The person to manage your account, that's now a details and ask them to sign this form:
MPRN or Prepayment Card Number GPRN (for Gas Customers) ow would you like to Email SMS You wish to have an alternative beloblem at all. Simply fill in their	Phone Post The person to manage your account, that's now a details and ask them to sign this form:
MPRN or Prepayment Card Number GPRN (for Gas Customers) ow would you like to Email SMS you wish to have an alternative oblem at all. Simply fill in their Your Prepayment card number (elected) Alternative contact name	Phone Post The person to manage your account, that's now a details and ask them to sign this form:



Registration Category

Electricity & Gas

Life Support Equipment

(If you have any of this equipment our services are unsuitable, and you must leave supply immediately. Please contact us on 0818 333 180)

Oxygen Concentrator	
Home Dialysis	
Total Parental Nutrition Machine	
Peg Tube Feeding Pump	
Personal Suction Machine	
Electric Pressure Relieving Mattress	
Other (please specify):	

Age

66 or over and living alone	
66 or over and living with a minor	
66 or over and living with other persons 66 or over	

Sight or Hearing impaired

Blind	
Partially Sighted	
Deaf	
Hard of Hearing	
Other (please specify):	

Non-Life Support Equipment (electricity only)

	Household Lift	
	Stair Chair	
	Nebuliser	
-	Ventilator (Sleep Apnoea)	
	Electric Hoist	
	Other (please specify):	
	Does the above equipment have battery back up?	

Mobility

Arthritis	
Wheelchair bound	
Paraplegic	
Quadriplegic	
Artificial Limbs	
Other (please specify):	

Simply post this form to: Priority Service Manager, PrepayPower Ltd, Paramount Court, Corrig Road, Sandyford, Dublin 18.