

## Are You Eligible for Certification Under the LifeLight Program?



The Versant Power LifeLight Program is intended to identify residential customers who have electrically-operated life support equipment or other special needs in their homes. For customers who qualify for the program, the utility will install a special seal at the meter to identify this service as an active participant in the LifeLight Program.

While the LifeLight Program does not guarantee uninterrupted electric service, Versant Power will take reasonable steps to notify LifeLight customers of planned work that may interrupt service. During times of extended unplanned power outages, Versant Power will make a reasonable effort to contact LifeLight customers to provide them with information regarding emergency shelters and, to the extent possible, expected times of service restoration.

Participation in the LifeLight Program does not mean customers are given priority status during the service restoration process and does not prevent disconnection of service for nonpayment.

To qualify, the customer or another occupant of the same dwelling must be dependent on some type of electrically-operated equipment for life support. The signature of a doctor, or other authorized healthcare representative, must support the declaration.

Versant Power Account Number: \_\_\_\_\_

### ***INFORMATION TO BE PROVIDED BY PHYSICIAN / HEALTHCARE REPRESENTATIVE***

Name and Address of Person on Medical Support Equipment:

Patient's Name: \_\_\_\_\_

Patient's Address: \_\_\_\_\_

Medical equipment currently in use requiring electricity for regular operation:

\_\_\_\_\_  
\_\_\_\_\_

How long will medical support equipment be required? \_\_\_\_\_

Physician's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Office Address: \_\_\_\_\_

Physician's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Your signature certifies that electrically-operated life support equipment exists within the household of the person listed above and the loss of electrical service would prevent the use of such equipment.

***Please complete this form and fax it or mail it to the address noted below, or email it to [info@versantpower.com](mailto:info@versantpower.com)***

30112-I-0178

### **Versant Power**

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