Life-Support Equipment/ Medical Emergency Survey

(Please print clearly or type)

Name		
Address	Apartment No.	
City	State	Zip
Phone number		
Con Edison Acco	ount Nur	nber
(If applicable)		
You can find your account number in My Account or on your bill.		
☐ Life Support E	quipme	nt (Identify type)
Medical Emergency Condition (Identify type)		
Customers who require lif who have a medical emer- our Third-Party Notification programs helpful.	gency condit	ion may also find

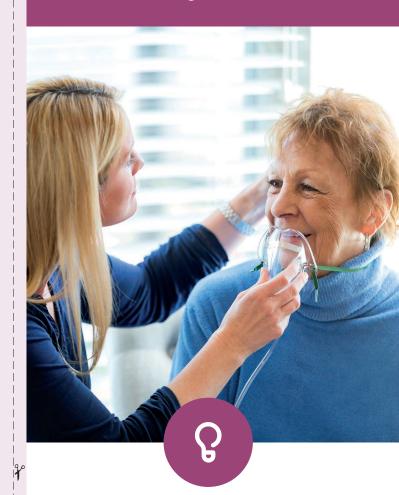
For more information, visit conEd.com/SpecialServices,

or call us at 1-800-75-CONED (1-800-752-6633)



Safety for Special Customers

Life-Support Equipment & Medical Emergencies



Do You or Someone You Know Depend on Medical Equipment That Requires Electricity or Have a Medical Emergency Condition?

We need to know so we can reach out in an emergency or power outage.

It is important that we have a record of anyone in the five boroughs or Westchester who depends on electricity for life-support equipment or has a medical emergency condition. This includes people who do not receive a bill from us because electric is included in their rent. Some examples of life-support equipment are respirators, apnea monitors (infant monitor), and hemodialysis equipment (kidney machine).

Let Us Know In One of These Easy Ways

- Visit conEd.com/MyAccount and choose "Manage My Account" and then select "Life Support Equipment."
- Complete the attached Life-Support Equipment/ Medical Emergency Survey and email it to lifesupportequipment@conEd.com.

Or mail it to:

Con Edison

30 Flatbush Avenue, Room 515 Brooklyn, NY 11217

Call 1-877-582-6633

We'll send you a confirmation letter within seven days of our receipt of your information.

For more information, visit conEd.com/SpecialServices

Certifying Your Life-Support Equipment or Medical Emergency Condition

To complete your registration, all life-support equipment and medical emergency conditions must be certified by a medical doctor, nurse practitioner, physician's assistant, or local board of health official, within 30 days of our receipt of your information.

The certifying party needs to include the following information on their stationery.

- Name, office address, and phone number.
- State registration number. (Applicable to doctors only.)
- Name, address, and medical condition of the person using life-support equipment.
- A signed affirmation that the condition would be aggravated by the absence of utility service.

Certifying documentation can be sent to: lifesupportequipment@conEd.com

Or: **Con Edison**

30 Flatbush Avenue, Room 515 Brooklyn, NY 11217

Storm Safety Tips for Users of Life-Support Equipment

- Have an alternate source of electric power or a battery back-up system.
- If you use a generator be sure to follow the manufacturer's instructions and local building codes.
- Make sure generators are in well-ventilated areas.
- Be aware that during a power outage, most cordless phones will not work, and cell phone service may be sporadic. Have a variety of telephone options (land-line, cellular) available.
- Consider keeping a list of emergency contacts.