



**Public Service
of New Hampshire**

The Northeast Utilities System

PHYSICIAN'S CERTIFICATION FORM MEDICAL EMERGENCY CUSTOMER STATUS

Dear PSNH Customer:

You have requested participation in PSNH's Medical Emergency Program. Please complete all the information requested below under "CUSTOMER" and then forward it to your physician. Your physician should complete the section below under "PHYSICIAN" and FAX or MAIL the completed form back to PSNH. Thank you for your cooperation.

CUSTOMER INFORMATION

Date _____ Customer Name _____

Customer Mailing Address _____

City _____ State _____ Zip _____

PSNH Account Number (11 digits) _/_/_/_/_/_/_/_/_/_/_/_/_/

Telephone Number (_____) _____

Name and Relationship of Person with Medical Condition: _____ // _____

I hereby authorize the release of medical information necessary for the completion of this physician's certification of medical condition form:

Signature: _____

TO BE COMPLETED IN FULL BY PHYSICIAN

The above customer has applied to PSNH for participation in PSNH's medical emergency program because he/she or someone within their household is suffering from a medical condition which would result in a medical emergency if electrical service were disconnected. In compliance with **puc 1203.11**, PSNH will consider this account to be in "Medical Emergency Status" provided you, as a registered physician, certify in writing that this patient is suffering from such a medical condition.

Date _____ Patient's Name _____

Description of Medical Condition _____

Would disconnection of electric service result in a medical emergency? _____ Yes _____ No

Projected Length of Medical Condition _____

Physician's Name and Address _____

Physician's Telephone Number (_____) _____

Physician's Signature _____ Provider's State License Number _____

Physicians...Please Note: Complete and return this form to PSNH within seven (7) days.

**Mail form directly to: Public Service Company of New Hampshire, PO Box 330, Manchester, NH 03105
or**

FAX form directly to PSNH at: (603) 634-3474

If questions, phone: 1-800-662-7764