

Customer Service Standards Claim Form

Customer Service Standards for Network Reliability and Performance

OFFICE USE ONLY

Claim No: _____

Please complete this form for supply interruptions experienced after 1 July 2006.

This claim form is to be used to make claims under the Customer Service Standards (the 'Standards') for Network Reliability. For more information about the Standards, please refer to the Brochure on EnergyAustralia's website.

Please ensure you supply all information requested on the form. Incomplete submissions may result in a delay in processing.

Customer Details: (The electricity account holder must complete this form)

Surname: _____ First Name: _____

Business Name (if applicable): _____

Location Address: _____

Suburb: _____ Postcode: _____

Contact No. (H) _____ (W) _____ (Other) _____

Postal Address (if different from above): _____

Suburb: _____ Postcode: _____

Date your electricity account commenced at this address if less than 12 months ago: _____

You can assist us to process your claim by providing your EnergyAustralia Account Number or, if you are with another energy retailer, your National Meter Identifier (NMI): _____ (Refer to your last electricity bill)

<input type="checkbox"/> Multiple Interruptions	<input type="checkbox"/> Extended Interruptions
Financial Year: _____ (Claim must be submitted by 30 September of next financial year)	Date: _____ (Claim must be submitted within 3 months of the event. If exact date is unknown please provide an approximation)

EnergyAustralia will assess your claim and notify you of the outcome within one month. If your claim is assessed as eligible EnergyAustralia will mail a cheque to you.

Declaration: All information included in this claim is, to the best of my knowledge, true and correct. I understand that it is an offence to make false or misleading claims.

Signed: _____ Name: _____ Date: _____

(If applicable) details of person authorised on your behalf:

I authorise the person indicated below to speak to EnergyAustralia on my behalf.

Name: _____ Relationship with Account Holder: _____

Send your claim to:

By mail: **EnergyAustralia Customer Service Standards, PO Box 365 CHARLESTOWN, NSW 2290**

Or by fax: **02 4942 0880**

For more information, please telephone **1300 132 348**.

Please note that a payment under the Customer Service Standards does not change the rights you may have against any person under law and does not represent an admission of legal liability by EnergyAustralia.

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