

GULF POWER COMPANY
One Energy Place
Pensacola, FL 32520

Information Sheet
For
Medically Essential Service Customers

Collections

Gulf Power Company will provide those customers certified as Medically Essential with an additional 30 days to pay a past due bill. This is 30 days beyond the date service would normally be subject to disconnection for non-payment of an electric bill. The separate disconnect notice will be mailed to the customer advising them of the past due amount needed to avoid disconnection and the disconnection date if payment is not made.

If it becomes necessary to disconnect the service of a Medically Essential Service Customer, the Company will attempt to contact the customer by telephone or at the premise on the workday prior to disconnection to inform the customer of the Company's intent to disconnect service. If contact is not made, the Company may leave written notification of its intent. Electric service is eligible for disconnection on the next workday. Full payment of the past due bill is required before service may be reconnected.

Planned Outages

Gulf Power Company attempts to contact, by mail, those customers who may be affected by a planned outage.

Unplanned Outages

Notifications of unplanned outages are **not** made because the Company does not always have prior knowledge of such outages. Medically Essential Service Customers are encouraged to call the Company's power out telephone number, 1-800-487-6937, if they are affected by an unplanned outage. Every attempt is made to keep our voice response unit, (VRU), up to date on outages and expected restoration times.

Back-Up Power

Gulf Power Company strives to provide the most reliable service possible for all of its customers. However, the Company cannot guarantee continuous service 100% of the time. Therefore, it is vitally important that a Medically Essential Customer maintain a back-up power supply to meet their needs in case of a power outage. There are many causes of power outages that are beyond the Company's control such as storms, squirrels on the line, etc. When these situations occur, the Medically Essential Service Customer should ensure that a back-up power supply is available for their use or make other arrangements for Medically Essential care until service is restored.

If assistance is needed to evaluate back-up power sources, the Medically Essential Service Customer may contact Customer Service at (800) 225-5797.

Medically Essential Electric Service

In order for Gulf Power Company to determine whether a customer is eligible for designation as a Medically Essential Electric Service Customer, Part A must be completed by the customer and Part B by the patient's physician and the entire form returned directly to Gulf Power Company at the following address: Gulf Power Company, One Energy Place, BIN 0031, Pensacola, FL 32520 or by email to Forms@GulfPower.com.

*****PLEASE TYPE OR PRINT CLEARLY*****

PART A: CUSTOMER APPLICATION

Date: _____ Gulf Power Account No. _____
Customer Name _____ Social Security . No. _____
Service Address _____
City, State, Zip _____
Daytime Area Code & Telephone Nos. (_____) _____ - _____ and/or (_____) _____
Name of Person Using Equipment _____ User's Physician _____

Gulf Power has fully explained the provisions of the Medically Essential Service tariff as detailed in the attachment. I understand that Gulf Power does not guarantee uninterrupted service or assign a priority status to my account for service restoration during outages. I understand that I must be prepared with backup equipment and/or power and a planned course of action in the event of prolonged outages. I agree to notify Gulf Power when this equipment is no longer in use.

Customer Signature _____ Date _____

PART B: PHYSICIAN'S CERTIFICATE

Physician's Name _____ Physician's License No. _____
Physician's Address _____
Physician's Area Code & Telephone Nos. (_____) _____ - _____ and/or (_____) _____ - _____
I, _____, duly licensed and authorized to practice medicine in

[Name of Physician]
the State of Florida, hereby certify that _____, [Name of Patient]
who resides at _____

[Patient's Place of Residence]

and who is under my care, relies upon continuously operating electric-powered medical equipment in order to sustain his/her life or to avoid serious medical complications requiring his/her immediate hospitalization. The continuously operating medical equipment upon which this patient relies is described as follows:

The patient uses this equipment _____ hours within each -twenty -four- (24) hour period. Following is why, in my opinion, this patient needs the continuous use of this equipment in order to sustain his/her life or to avoid serious medical complications requiring his/her immediate hospitalization: [Attach additional sheets if necessary] _____

Physician's Signature _____ Date _____

This certificate shall be deemed valid for a period of twelve (12) months from the date the certificate is accepted by Gulf Power for purposes of determining that a customer qualifies as a Medically Essential Service Customer or that such designation should be renewed.

Please be advised false certification of medically essential service by a physician is a violation of Florida statutes, s. 458.331(1)(h) or s. 459.015(1)(i).