111 Contact Codeapplication form



Complete this application form if you want your telecommunications provider to consider you (or someone you are applying on behalf of) to be covered by the 111 Contact Code.

The 111 Contact Code ensures that people who are more likely to need to contact 111, and who have a home phone line that doesn't work in a power failure (with no other means of contacting 111 at their house), are provided with a means to contact the 111 emergency service.

To be covered by the 111 Contact Code, a person must:

- be at particular risk of requiring the 111 emergencyservice (either now or sometime in the nearfuture);
 and
- in the event of a power failure, not have a means to contact the 111 emergency service at their premises that can work for a continuous 8-hour period.

This form can <u>only</u> be completed by one of the following people:

- a customer (the account holder);
- · a person who is listed as an authority on the customer's account; or
- the customer or person listed as an authority on the customer's account on behalf of someonewho lives at the premises where the home phone line is supplied.

Instructions for completing from

- 1. Fill in Parts A, B and Cof the form.
- 2. Complete the declaration in Part D of the form.
- 3. Return the completed form to [insert provider's contact details].

Part A: Personal details

| 1. Are you the customer (account holder)? | □Yes (fill out 3a) |
|---|--|
| | □ No (Go to Q2) |
| | |
| 2. Are you a person listed as an authority on the customer's account? | □Yes (fill out 3a and 3b) |
| | □ No *You must be added as an authority to the customer's account before you make this application |

| Details of customer | | |
|---|--|--|
| First name(s): | Preferred first name (if different): | |
| Surnameor family name: | | |
| Title: □ _{Mr} □ _{Ms} □ _{Mrs} □ _{Mi} | ss Dr Other, please specify | |
| What is the customer/househo | ld account number (or equivalent) with the provider? | |
| M/hat in the address resolving p | hana contina? | |
| What is the address receiving p Flat Street name | HOHE SELVICE! | |
| Suburb | | |
| City | | |
| Postcode | | |
| Telephone: | Mobile: | |
| Email address: | | |
| Postal address: | | |
| | | |
| | | |
| City/Town: | Postcode: | |
| th Details of person listed | as an authority on the customer's account | |
| Please only fill out this section i | • | |
| riease <u>orny</u> nii out uns secuom | i you are <u>not</u> the customer | |
| First name(s): | Preferred first name (if different): | |
| Surnameor family name: | | |
| | | |

| Email address: Postal address: City/Town: Postcode: 4. What is the preferred method of contact (please tick)? Home phone Mobile Mail Email 5. Are you making this application for yourself, or on behalf of someoneelse? (Go to Part B) I am applying on behalf of someone else (fill out 5a) 5a. Details of person who wants to be covered by the 111 Contact Code Please only fill out this section if you are applying on behalf of someone else Details of person who wants to be covered by the 111 Contact Code |
|--|
| A. What is the preferred method of contact (please tick)? Home phone |
| 4. What is the preferred method of contact (please tick)? Home phone |
| Home phone |
| 5. Are you making this application for yourself, or on behalf of someoneelse? □ I am applying to be covered by the 111 Contact Code (Go to Part B) □ I am applying on behalf of someone else (fill out 5a) ia. Details of person who wants to be covered by the 111 Contact Code Please only fill out this section if you are applying on behalf of someone else |
| application for yourself, or on behalf of someoneelse? I am applying to be covered by the 111 Contact Code (Go to Part B) I am applying on behalf of someone else (fill out 5a) a. Details of person who wants to be covered by the 111 Contact Code Please only fill out this section if you are applying on behalf of someone else |
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| Please only fill out this section if you are applying on behalf of someone else |
| Please only fill out this section if you are applying on behalf of someone else |
| Details of person who wants to be covered by the 111 Contact Code |
| |
| First name(s): Preferred first name (if different): |
| Surnameor family name: |
| Salutation: \square_{Mr} \square_{Ms} \square_{Mrs} \square_{Miss} \square_{Dr} $\square_{Other, please specify}$ |

| PARTB:Information on the person at particular risk | | |
|--|--|--|
| How to complete Part B | | |
| ReadGuidance Note 1 (provided in Part E). | | |
| · · · · · · · · · · · · · · · · · · · | | |
| 2. Complete Q6 and Q7 | | |
| 6. Please select which category most closely relates to the specific circumstance of the person | | |
| who wants to be covered by the 111 Contact Code? | | |
| □Health | | |
| | | |
| □Safety | | |
| □Disability | | |
| | | |
| 7. Is the specific circumstance of the person permanent or temporary? | | |
| ☐ Permanent | | |
| ☐ Temporary | | |
| *If you selected 'Temporary', what is the estimated period of time the category of particular risk will apply to the person? | | |
| | | |

| Part C:Supporting information |
|---|
| |
| How to complete Part C: |
| ReadGuidance Note 2 (provided in Part E). |
| 2. Complete Q8. |
| 8. What information is being provided in support of the application? |
| ☐ Sufficient evidence to support that you (or the person you are applying on behalf of) is (or will become) at particular risk of requiring the 111 emergency service (fill in 8a) |
| OR |
| ☐ Details of a nominated person we can contact to verify that you (or the person you are applying on behalf of) is (or will become) at particular risk of requiring the 111 emergency service (fill in 8b and 8c) |
| 8a. Sufficient evidence to support that you (or the person you are applying on behalf of) is (or will become) at particular risk of requiring the 111 emergency service * Pleaseattach this supporting evidence to your application. |
| Pleasedescribe the supporting evidence you are providing: |
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| |

| First name(s): | Surnameor family name: | |
|--|--|-----------------|
| Occupation: | | |
| Organisation (if applicable): | | |
| Telephone: | Mobile: | |
| Email address: | | |
| Postal address: | | |
| | | |
| | | |
| City/Town: | Postcode: | |
| . Declaration regarding nomina ease note that if you are making this appl | | eclaration, you |
| . Declaration regarding nomina ease note that if you are making this appl | ted person ication on behalf of someoneelse, before completing this deson to authorise us to contact the nominated person o contact | eclaration, you |
| . Declaration regarding nomina ease note that if you are making this appled to have received permission from that permits an authorise [insert provider details] to | ication on behalf of someone else, before completing this descent authorise us to contact the nominated person o contact | for |
| Declaration regarding nominal ease note that if you are making this applicate have received permission from that permitted in authorise [insert provider details] to | ication on behalf of someone else, before completing this desconto authorise us to contact the nominated person o contact (Full name of nominated person) the person I am applying on behalf of) is (or will become | for |

PARTD: General declaration

How to complete Part D:

- 3. ReadGuidance Note 3 (provided in Part E).
- 4. Complete the declaration.

| I acknowledgeand declare that, to the best of my knowledge, the information given in this form is correct; | | | | |
|---|--|--|--|--|
| I acknowledge and declare that | : | | | |
| (please insert your nam | e here, or the person you are applying on behalf of) | | | |
| ois (or will become)at particular risk | of requiring the 111 emergency service; and | | | |
| | ne 111 emergencyserviceat the premisesthat can be | | | |
| operated for a continuous 8-hour po | eriod in the event of a power failure; | | | |
| I understand that the information I have provided in this form will be stored with [insert provider details]; | | | | |
| uetanoj, | | | | |
| • I understand that the information I have provided in this form may be shared with relevant third parties | | | | |
| for the purposes of providing and managingmy service. | | | | |
| | | | | |
| Signature: | Date: | | | |

PARTE: Guidance

GUIDANCE NOTE 1

For a person to be covered by the 111 Contact Codethey must be 'at particular risk of requiring the 111 emergency service'. Part B asksfor information that will allow us to know that the person who is applying to be covered by the 111 Contact Code is 'at particular risk of requiring the 111 emergency service'. The person could be 'at particular risk' now, or sometime in the near future, and they may be at risk on a temporary or permanent basis.

Q What does 'at particular risk of requiring the 111 emergency service' mean?

A person who is "at particular risk of requiring the 111 emergencyservice" means a person who is more likely than other people to require the 111 emergency service because of a specific circumstance applicable to that consumer.

The following scenariosillustrate some situations where a person may be considered 'at particular risk' under the 111 Contact Code.

Scenario one

Mary and Joeare pensioners living together. Thesedays Joeis unsteady on his feet. He has fallen over a couple of times recently. Mary is active but spendsmost of her time at home looking after Joe. Mary is worried that the next time Joefalls he might seriously injure himself.

Scenariotwo

Fatima has type 2 diabetes and is in the early stages of dementia. Fatima needs to take medication every day to manage her conditions.

Scenario three

Jennifer's father has moved backinto the family home. He's been verbally and physically abusive to family members in the past and Jennifer is worried that it might happen again.

Scenario four

Tane is booked in to have both knees replaced. He lives alone and is worried about complications or a fall and needing to access the 111 emergency service during recovery over the next three months.

Q What do the 'Health', 'Safety' and 'Disability' categories in Question6 mean?

This question asksyou to select which of three categories (health, safety or disability) <u>most closely relates</u> to the specific circumstance you (or the person you are applying on behalf of) has that means you (or the person you are applying on behalf of) is at particular risk of requiring the 111 emergency service.

If you tick the 'health' category, this means the specific circumstance that makesyou (or the person you are applying on behalf of) at particular risk of requiring the 111 emergency service is related to health. For example, it is a known medical condition.

An example of a specific circumstance that may mean you tick the 'safety' category is family violence. An example of a specific circumstance that may mean you tick the 'disability' category is sensory impairment, intellectual impairment or physical impairment.

Q Do I have to be 'at particular risk' now, or couldit be sometime in the future?

A person may not be 'at particular risk' now, but they know they will become 'at particular risk' sometime in the near future. For example, a person who has a planned surgical operation.

Q How can a person be 'at particular risk' on a temporary or permanent basis?

A person may be 'at particular risk' because they have suffered a physical injury, but the person expects to recover from this injury after a certain period of time. In these circumstances, the person is only 'at particular risk' on a temporary basis.

An example of a person who may be 'at particular risk' on a permanent basis is a person who has congenital blindness and will not recover.

Question 7 asksyou to tell us whether the specific circumstance that makesyou (or the person you are applying on behalf of) 'at particular risk' is on a temporary or permanent basis.

GUIDANCE NOTE 2

Part Casks for information to support the answers given to Q6 and Q7 in Part B.

One of the following must be provided:

- (a) sufficient evidence to support that you (or the person you are applying on behalf of) is (or will become) at particular risk of requiring the 111 emergency service; or
- (b) the details of a nominated person we can contact to verify that you (or the person you are applying on behalf of) is (or will become) at particular risk of requiring the 111 emergency service.

Q Who can be a 'nominated person'?

A nominated person must be someone who, by virtue of their occupation, is competent to give an opinion on whether you (or the person you are applying on behalf of) is at particular risk of requiring the 111 emergency service.

For example, if the 'health' or 'disability' category has been ticked in response to Q6, then a health practitioner (such as a GP)could be a nominated person. If the 'safety' category has been ticked, then a police officer, a currently registered social worker, a lawyer (with a current practicing certificate), or a family court judge could be a nominated person.

We recommend that before you make your application to us, you (or the person you are applying on behalf of) first contact the nominated person to discuss the application.

Q If I don't provide the details of a nominated person, what sort of evidence must be provided?

It must be sufficient information to show that you (or the person you are applying on behalf of) is (or will become) at particular risk of requiring the 111 emergency service.

Examples of evidence that may be sufficient include:

- a completed Electricity Authority 'Notice of Potential Medically Dependent Consumer(MDC)Status' form,
 which includes a certification from a DHB, private hospital or GP(accessible from their website here:
 https://www.ea.govt.nz/operations/retail/retailers/retailer-obligations/medically-dependent-and-vulnerable-customers/);
- a protection order;
- a letter from a health practitioner (eg, a GP);or
- documentation of impairment (eg, an ID card).

GUIDANCE NOTE 3

Part D asksyou to make some declarations regarding the content you have provided in the application, and to acknowledge that you understand what we (the provider) may do with the information you have provided in the application.

One of the declarations asksyou to declare that the person who wants to be covered by the 111 Contact Code:

- is (or will become) at particular risk of requiring the 111 emergency service (information on what this means is provided in Guidance Note 1); and
- does <u>not</u> have a means to contact the 111 emergency service that can be operated at the premises for a continuous 8-hour period in the event of a power failure".

Q What is the 111 emergency service?

The 111 emergency service includes the ambulance service, police service and fire and emergency service.

Q What does 'a means to contact the 111 emergency service that can be operated at the premises for a continuous 8-hour period in the event of power failure' mean?

It means that the person has a way of contacting the 111 emergency service at the premises where they live.

The 'means' a person usesto contact the 111 emergency service must be able to work for a continuous (ie non-stop) 8-hour period if used as instructed.

A person will have a way of contacting the 111 emergency service if:

- the premises where they live is receiving a copper landline service (becausethis service will continue to work in a power cut);
- the person has unrestricted accessto a mobile phone and the premises where they live has adequate mobile phone network coverage; or
- the person has an uninterruptable power supply to maintain a means for contacting the 111 emergency service in the event of a power failure (eg a battery back-up).

GENERALGUIDANCE

What is the 111 Contact Code?

The purpose of the 111 Contact Code to ensure that consumers who are at particular risk of requiring the 111 emergency service, and do not have a means for contacting the 111 emergency service, have reasonable access (or persons on their behalf do) to an appropriate means (eg, a mobile phone) to contact the 111 emergency service in the event of a power failure.

If you have a dispute about your (or your telecommunication company's) rights and obligations under the 111 Contact Code, you have a right for that dispute to be referred to an industry dispute resolution schemeto resolve. A consumer's right to take a dispute under the 111 Contact Codeto an industry dispute resolution schemeis protected under the TelecommunicationsAct 2001 (sections 241-245). Currently, the relevant industry dispute resolution scheme is the Telecommunications Dispute Resolution Scheme.

The 111 Contact Code is administered by the Commerce Commission. More information on the 111 Contact Code, and a copy of the 111 Contact Code, is available on the Commerce Commission's website here: https://comcom.govt.nz/regulated-industries/telecommunications/projects/commission-111-contact-code.

What is the Telecommunications Dispute Resolution Scheme?

The Telecommunications Dispute Resolution Schemeis a free, independent service to help consumers with complaints about their telecommunications provider. A dispute between a consumer and a telecommunications company about their rights and obligations under the 111 Contact Codemay be referred to this Scheme.

For more information on the Telecommunications Dispute Resolution Schemeyou can contact us at [insert provider's contact details] and we will refer to where to find more information, or you can read more about the Schemeandhow to contact them on their website here: https://www.tdr.org.nz/about-tdr/all-about-tdr.

Who should I contact if I have any questions about this form?

Pleasecontact us at [insert provider's contact details] if you have any questions about the form, or the 111 Contact Codemore generally.

Alternatively, you can contact the Commerce Commissionat contact@comcom.govt.nz, or phone the Commission's Enquiries team on 0800 943 600.