

WaterSure Scheme Application Form

(formerly called
the Vulnerable
Customer Scheme)

Please fill in this form
for help with the cost
of your water bill.

This information is
required to assess
your claim and
will not be used for
any other purpose.

1. You must fill in this page

Who is the person named on the water bill?

1 Mr Mrs Miss Ms Other

2 First name

3 Last name

4 Postal Address

Post code:

5 Daytime telephone number

6 Evening telephone number

Mobile phone number

7 Customer number (you can find this on your water bill)

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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About benefits or tax credits

8 Are you, or someone in your household, receiving any of the following benefits or tax credits? Please note: you **must** receive one of the following benefits to qualify for WaterSure. (Please tick all that apply.)

Income Support

Income-based Jobseeker's Allowance

Working Tax Credit

Child Tax Credit (not just the family part)

Housing Benefit

Council Tax Benefit (not single person discount)

Pension Credit

Income-related Employment and Support Allowance

9 Please give the name and National Insurance number of the person who receives one or more of the above benefits or tax credits.

Name

National Insurance number

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Notes

8 **To qualify for WaterSure, someone in your household must be receiving at least one of the benefits or tax credits listed.**

You must provide a photocopy of the latest 'notice of entitlement' for the benefits or tax credits.

The 'notice of entitlement' **must be less than one year old for a benefit or less than six months old for a tax credit.**

If you do not have a notice you can get a replacement by contacting your council or local benefit or tax credit office. (See 'Useful contacts' on page 3.)

We are unable to accept provisional tax credit notices as they do not confirm entitlement.

What to do once you have completed this page

If you are applying because of a medical condition, go to page 2.

If you are applying because you have a large family, go to page 3.

2. Fill in this page if you are applying because of a medical condition

Medical conditions needing extra water use

10 Please tell us the name of the person in your household who has a medical condition that means they have to use a lot of extra water

.....

11 Which of these medical conditions do they have? (Tick all that apply.)

- a) Desquamation (flaky skin disease)
- b) Weeping skin disease (eczema, psoriasis, varicose ulceration)
- c) Incontinence
- d) Abdominal stoma
- e) Renal failure where they need home dialysis
(do not tick if the health authority helps with water costs)
- f) Crohn's disease
- g) Ulcerative colitis
- h) Another condition which means they have to use a lot of extra water
(please tell us the name of this condition)

.....
.....

12 Please give the name and address of the doctor or hospital consultant who knows about this condition.

Name

Address

.....

Post code

Surgery or health centre official stamp (optional)

Notes

10 We need to know the name of the person with the medical condition.

11 Please tell us the medical conditions the person has by ticking all the relevant boxes.

Important - If you tick one of the named conditions listed at a) to g), please give us a copy of your repeat prescription form or a doctor's certificate explaining your condition and why you need to use extra water. You can ask for copies of these from your surgery, clinic or hospital. If you do not have the prescription or certificate, please provide some other evidence that you have the condition and why you need to use extra water.

or **If you tick h) 'Another condition' you must include a doctor's certificate or letter from a GP or hospital consultant.** The letter or certificate must say:

- the name of the patient;
- the condition they have which means they have to use a lot of extra water;
- the date the certificate or letter was issued; and
- the name, position and address of the GP or consultant.

12 Please tell us who we can contact to confirm this condition (for example, a doctor or hospital consultant).

3. Fill in this page if you are applying because you have a large family

This section is for families with three or more children under 19 living at home.

13 I confirm that I or a member of my household receives benefits or tax credits (named at question 9) and claims Child Benefit for three or more children under 19 who live with us permanently. Please tick.

14 Please give the full names and dates of birth of these children

Name	Date of Birth
.....	/ /
.....	/ /
.....	/ /
.....	/ /
.....	/ /

(Continue on a separate sheet of paper if necessary.)

Notes

13 You should tick this box if the person receiving benefits is responsible for and claims Child Benefit for three or more children who live at the address on the water bill.

14 Please provide the full name and date of birth for each child.

You **must** provide a copy of the latest 'notice of entitlement' to Child Benefit for each child you list here.

If you cannot find your 'notice to entitlement' to Child Benefit, please contact the Child Benefit Centre. (see 'Useful contacts').

The 'notice of entitlement' to Child Benefit must include the claimant's address details.

Useful contacts

Water company	United Utilities PO Box 50 Warrington WA55 1AQ Tel: 0845 309 3001
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You can get replacement or up to date 'notice of entitlement' from the following authorities:

Name of benefit or tax credit	Authority
• Income Support • Jobseeker's Allowance • Pension Credit • Income-related Employment and Support Allowance	Contact your local Job Centre Plus office or benefits office
• Working Tax Credit • Child Tax Credit	Tax Credits helpline: 0845 300 3900
• Housing Benefit • Council Tax Benefit	Contact your local authority (council) for details
• Child Benefit	Child Benefit helpline: 0845 302 1444

4. You must fill in this page

Declaration

The information I have given is correct to the best of my knowledge and I understand that if I provide any information which is false, you may refuse to consider my claim.

If my circumstances change and it may affect my claim, I will tell you straight away.

I give permission to the authority that provides my benefit or tax credit to give you any further information to support my application.

If I have made a claim because of a medical condition, I give the medical professional who knows about that condition permission to give you information about the condition and why I need to use more water, to confirm the information I have provided.

If I pay my sewerage charges to a different company, I give you permission to pass on the details I have provided so that you can also consider my sewerage charges under the WaterSure scheme.

WARNING If you deliberately give us misleading information you are committing a criminal offence and could be prosecuted.

I confirm the following:

- A member of my household meets the conditions for help under the WaterSure scheme.
- I only use a hosepipe or watering can to water my garden.
- My household does not have an auto-filling swimming pool or pond which holds over 10,000 litres of water.
- I do not receive any help towards the cost of water from the health authority.

Your Signature

Date

Signature of the person receiving benefit or who has the medical condition (if they are not the person named on the water bill).

We need this signature for data protection purposes

.....
Please note: only send us copies of your supporting documentation (not originals) as we are unable to return anything to you.

Checklist

Tick as appropriate

- I've filled in all the parts of the form which apply to me (parts 1, 2 and 4 or 1, 3 and 4).
- I have enclosed a photocopy of the latest 'notice of entitlement' for benefit or tax credit.
- If I've ticked 'another medical condition' I have enclosed a copy of a doctor's certificate or a letter from a GP or consultant confirming that this condition needs extra water.
- If I've completed part 2, I have enclosed a copy of my prescription form or doctor's certificate.
- If I've filled in part 3, I have enclosed a copy of the latest 'notice of entitlement' to Child Benefit for each child.

How did you find out about WaterSure?

- One of our leaflets
- From a friend or relative
- Our website
- Citizens' Advice
- On my water bill
- From a United Utilities employee (ie: when you contacted our call centre)
- Other (please state)

Remember to enclose copies of supporting evidence with your application form

Send your filled-in form and other information (see checklist) to:

United Utilities
PO Box 50
Warrington
WA55 1AQ

unitedutilities.com

United Utilities Water PLC
Haweswater House
Lingley Mere Business Park
Lingley Green Avenue
Great Sankey
Warrington
WA5 3LP

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