



WILLMAR MUNICIPAL UTILITIES

"Willmar Municipal Utilities will provide safe, reliable & quality utility services at competitive rates for their customers."

MEDICAL ALERT STATUS WAIVER

CUSTOMER CERTIFICATION: (To be completed by customer)

Customer Name

Account #

Service Address

City, State, Zip

Home Phone

Cell Phone

Business Phone

Resident(s) requiring life-sustaining medical equipment

RELEASE: (to be completed by resident requiring life-sustaining equipment or his/her legal guardian)

I, _____, Resident Legal Guardian, hereby grant my consent to the below-named licensed physician to release to Willmar Municipal Utilities such information as noted below, plus any supplemental information regarding critical medical equipment used at the residence.

Signature Resident/Legal Guardian

Date

MEDICAL CERTIFICATION: (to be completed and signed by Physician, Physician Assistant, or Nurse Practitioner)

This is to certify that _____ has a medical need for electricity and could suffer life threatening conditions if without electricity for more than _____ hours. Due to this condition, I recommend that electricity not be intentionally interrupted without prior notification.

Duration of Medical Emergency

Required Critical Equipment

Physician, Physician Assistant or Nurse Practitioner Signature

License Number

Date

Business Name

Phone

Business Address

City, State, Zip Code:

This service is subject to expiration on or after the date provided by the Licensed Physician. All Medical Alert Applications are reviewed semi-annually.

Return this form by email, mail or fax

7/2020



700 LITCHFIELD AVENUE SW · P.O. BOX 937 · WILLMAR, MN 56201

PHONE: (320)235-4422 · FAX: (320)235-3980

EMAIL: wmu@wmu.willmar.mn.us

VISIT US AT: www.wmu.willmar.mn.us



Keep Utilities informed a MEDICAL ALERT STATUS WAIVER

If you have a health condition that would be affected by a shut off of utilities, you should take the time to communicate with your doctors to assure your health is not put at risk. Planning ahead and communicating special needs are key.

If a permanent member of the household has a medical condition defined as “especially dangerous” to health, contact (320) 235-4422 to request a Medical Alert Status Waiver. Willmar Municipal Utilities can give preference to individuals who rely on life support devices, such as respirators, ventilators or other medical equipment. There is no guarantee for immediate power restoration, however, we will give priority to these customers for power restoration. You should always have a backup plan in place for extended outages out of our control.

Contact WMU about your medical needs before you face a disconnection or power outage during a storm or other event that might disrupt your utility service.

Medical Alert Status Waiver

The certification must be signed by a licensed physician, physician assistant, or advanced practice registered nurse. Generally, the medical personnel will email, mail or fax the completed form to the utility company. The fax # is (320) 235-3980. This service is subject to expiration on or after the date provided by the licensed physician. The responsibility for determining whether a condition warrants a medical certification lies exclusively with the medical professional, not the utility company. This determination is made by the doctor consulting with the patient. All Medical Alert Status Waivers are reviewed semi-annually.

The consumer should contact the Utilities (320) 235-4422 if services are no longer needed.

Payment Plans

Medical certifications can postpone a disconnection, however, customers are still ultimately required to pay for electric, water and sewer services. Consumers with a medical condition who also are experiencing difficulty paying their utility bills have options available to them. For all consumers, we offer alternative payment plans, automatic bill pay and budget plans. For income eligible consumers, Home Energy Assistance Program (E-HEAP) local community action and other energy assistance providers are available within our community to assist you in establishing necessary payment arrangements.

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