

POWER FOR
YOUR WAY
OF LIFE



PO Box 52 - 1701 SE Loop 304
Crockett, Texas 75835
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A Touchstone Energy® Cooperative 

Houston County Electric Cooperative attempts to maintain a record of customers dependent up electrical life support systems in order to facilitate the maintenance and restoration of electrical service to such customers as soon as the situation reasonably permits. When you notify us, we will enter the information in your account file. If your situation changes and the equipment is no longer needed, please notify Houston County Electric Cooperative as soon as possible so that we may keep your account file up-to-date.

Please note, that during severe weather, widespread outages may occur and despite our best efforts, power could be out for extended periods. In the event of inclement weather or prearranged outages, customers are advised to have alternate arrangements in place or an alternate power source available.

Persons having a need to be designated as Life Support Dependent Customers should complete the Customer's portion of this form and have their doctor complete the Physician's portion and return it to the Houston County Electric Cooperative Office.

To Be Completed By Customer:

Name On Account: _____ Account#: _____

911 Address: _____

County: _____ Telephone #: _____ Email: _____

Reason: _____

Backup Power Supply (type and how long it will last): _____

I have read and understood the preceding information and certify that the information provided in this form is correct.

X _____
Customer Signature Date

To Be Completed By Physician:

Description of Illness: _____

Description of Life Support Equipment: _____

Extent of Time and Use of Life Support Equipment: _____

Physician Name (Printed): _____ Phone Number: _____

X _____
Physician Signature Date