

NI Domestic Electricity Customer Agreement Form

Please remember to include a copy of your latest electricity bill with this Agreement Form



Airtricity Energy Supply (NI) Ltd, 2nd floor, 83-85 Great Victoria Street, Belfast BT2 7AF

Tel: 0845 603 4444

Email: sales@airtricity.com

Airtricity.com

* Denotes mandatory fields

1: CUSTOMER DETAILS (BLOCK CAPITALS PLEASE)

NIE Customer Number

I am aware of the 10 day cooling off period Yes No

Existing/Previous Airtricity Customer Account No.

MPRN Number
MPRN number is an 11-digit number to be found on top right hand corner of your electricity bill

Promotional Code (If applicable)

* Product Selection

* Account Name 1 Mr Ms Mrs Other

* First Name

* Last Name

* Account Name 2 Mr Ms Mrs Other

* First Name

* Last Name

* Principal Account Holder Date of Birth D M Y

Email Address

Please give active email address as this may be used for important communication

* Contact Number Mobile

Telephone

Do you own this premises Yes No

How long have you been at this address Years Months

Landlord Details Name

Address of Landlord

Telephone of Landlord

2: BILLING DETAILS

* Building Name

* Street

* Town/City

* County

* Postcode

* Premises Address (if different from above)

* Building Name

* Street

* Town/City

* County

* Postcode

9: DATA PROTECTION

We may hold the information provided for the purpose of supplying you with electricity, servicing your arrangements with us and as otherwise described in clause 13 of the Standard Terms and Conditions. Occasionally, we may advise you by letter, phone, electronic mail or SMS of services or products which we believe that you may be interested in. If you do not want to receive such details please exercise your right of opt-out either (a) by writing to us at: Airtricity Energy Supply (NI) Ltd, Data Protection Opt-out, FREEPOST, 2nd Floor, 83-85 Great Victoria St, Belfast BT2 7AF.; or (b) by emailing us at unsubscribe@airtricity.com. Please include your account/MPRN number on all correspondence.

10: DIRECT DEBIT MANDATE FORM: Please complete part 1 to 4 to instruct your Bank/Building Society/Credit Union to make payments directly from your account.

1: To the Manager of the Bank/Building Society/Credit Union

2: Name(s) of Account Holder(s)

3: SPECIAL SERVICES/NEEDS (If applicable)

Customer special services/Medical special needs

Are all occupiers residing at this address of state pensionable age and / or under 18 years of age? Yes No

Does anyone residing at your home require special services? Yes No

Is anyone residing in your home dependent on life support electrical medical equipment? Yes No

If yes we will send you a priority support registration form which you must complete and return to us in order to be registered.

Visually impaired Speech impaired Hearing impaired

Language difficulty Mobility impaired Dexterity impaired

4: CUSTOMER METER READINGS

If there is a delay in meter registration, the reading(s) you provide may not be used by Airtricity for agreement start date

Meter Number

24 Hour Meter Reading

Day Meter Reading

Night Meter Reading

Heating/Off-Peak Reading

Date of Reading D M Y

If you have more than 1 meter, please submit details on a separate sheet

5: PAYMENT DETAILS

* Payment Method Direct Debit

Payments by means other than Direct Debit shall require me to provide a minimum credit deposit of £200 per MPRN. Deposit required? Yes No

Rental Property: Payments by Direct Debit shall require me to provide a minimum credit deposit of £200 per MPRN. Deposit required? Yes No

6: ADDITIONAL DETAILS

Would you like to receive your bill as an e-Bill? Yes No

An email notification is sent to you to inform you when your bill is ready to be viewed in PDF format online. You will not receive a paper copy of your Airtricity bill.

Receive an alert to submit your meter readings: SMS Alert Email Alert

Where did you hear about us?

7: DECLARATION

I confirm that the information that I have provided is correct; the supply address is currently supplied with mains electricity and is a residential premises and you may: (a) use the information to make or obtain enquiries, searches and references about me (including my previous consumption history) from any person including any credit reference agency, my previous electricity supplier or the electricity distributor; (b) keep and use information about me, which may also be disclosed to, and used by other persons as necessary, for administering my account and/or for processing my data/information and/or your business generally, for assessing applications for credit by me and for fraud prevention, tracing debtors and/or debt collection; and I understand this document is a legally binding offer by me to Airtricity Energy Supply (Northern Ireland) Limited which may, upon acceptance, request a security deposit from me. I have read and agree to the General Terms and Conditions AL3/NI/DOM/TC1. I confirm that I am authorised to make this declaration and sign this form.

Signature Date D M Y

8: TO BE COMPLETED BY AIRTRICITY REPRESENTATIVE (if applicable)

Rep Name

Date D M Y Move in Date D M Y

Change of Tenancy New Sign Up

Additional information

For official use only

Airtricity Account Number

Airtricity Identification Number **8 6 1 2 1 4**

Signature Date D M Y

Signature Date D M Y

There may be a charge for unpaid Direct Debits to cover administration costs.

THE DIRECT DEBIT GUARANTEE: (This guarantee should be detached and retained by you)

- This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits.
- If there are any changes to the amount, date or frequency of your Direct Debit, Airtricity will notify you 10 working days in advance of your account being debited or as otherwise agreed. If you request Airtricity to collect a payment, confirmation of the amount and date will be given to you at the time of the request.
- If an error is made in the payment of your Direct Debit by Airtricity or your bank or building society,

- you are entitled to a full and immediate refund of the amount paid from your bank or building society.
- If you receive a refund you are not entitled to, you must pay it back when Airtricity asks you to.
- You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify us.



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Signature Date

8: TO BE COMPLETED BY AIRTRICITY REPRESENTATIVE (if applicable)

Rep Name

Date Move in Date

Change of Tenancy New Sign Up

Additional information

3: Bank/Building Society/Credit Union Account No. Sort Code

Banks/Building Societies/Credit Unions may decline to pay Direct Debit from some types of accounts.

4: Please pay Airtricity Energy Supply (Northern Ireland) Limited Direct Debits from the account details on this instruction subject to the safeguards assured by The Direct Debit Guarantee. I understand that this instruction may remain with Airtricity Energy Supply (Northern Ireland) Limited and if so, details will be passed electronically to my Bank/Building Society/Credit Union.

Signature Date

Signature Date

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